	FOR	OFFICE	USE	ONLY
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Application #:	
Date Received: _	

Zone: _



City of Prineville Fill/Grading Permit

PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

PROPERTY OWNER AND APPLICANT INFORMATION

Applicant Name		Phone	/					
Address		City	State	Zip Code				
		Email						
Property Owner		Phone	/					
Address		City	State	Zip Code				
PROPERTY DESCRIPTION Property address / location (intersection of cross streets, general area):								
Map # - Township	Range	Section	Та	x Lot				
 PROJECT DESCRIPTION Is property within floodplain? Is property within a drainage way? 								
Describe Project:								
REQUIRED INTEMS Note: Additional infor	mation <u>may be r</u>	TTED FOR Fil required depend	ll/Grade Perr ding on the a					

- □ Grading and Drainage Plan to protect neighboring property.
- □ Signatures of owners verification of ownership (space provided below)

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PROFESSIONAL SERVICES

Builder/Agent:		Phone	/_	
Address	City		State	_Zip Code
	Email			
Architect/Designer/Engineer:		Phone	/	
Address	City		_ State	Zip Code
	Email			
The information on this application is required by the City of Prineville. I a to the best of my knowledge. Also, by various Committees, Planning and En designated by the City of Prineville th property specified above to inspect in	attest that all infor filing this applican ngineering Staff a nat may be involve	mation so sul ation, permiss nd Councils, a ed in the revie	omitted is co sion is grant and/or any o w of this ap	omplete and accurate ed to members of the other persons oplication, to enter the
Applicant:			Date: _	
Signatu	ure			
Property Owner:			Date: _	
Signati				

Please note: additional information may be required by the Planning Department prior to the application being deemed complete. Also, if you are an authorized Agent, please attach a letter of authorization signed by the Property Owner allowing you to act in their behalf during this process.

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