

Office Use Only

Permit Number	_____
Date issued	_____
Expiration Date	_____

# City of Burton

## Permit Application

### Excavation, Removal, Fill Deposit, or Grading Permit

Office Use Only

Fee	_____
Cash/Check	_____
Received By	_____

**1. Applicant** (Please check if applicant is the landowner or designated agent)

Name			
Address			
City	State	Zip	Telephone

**2. Location**

Subdivision	Lot No.	Tax ID Number	Street Address
-------------	---------	---------------	----------------

**3. Proposed Earth Change**

Project Type:     Residential     Industrial     Multi-family     Land

Describe Project:	Size of earth change (acres or sq. ft.)	
	Est. Date of start	Est. Date of completion

**4. Parties Responsible for earth change**

Name of landowner (if not provided above)		Address		
City	State	Zip	Telephone + area code	
Name of individual "On Site" responsible for earth change		Company name		
Address	City	State	Zip	Telephone

**5. Signature**

I (we) affirm that the above information is accurate and that I (we) will conduct the above described earth change in accordance with Part 91, Soil Erosion and Sedimentation Control, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended, applicable local ordinances, and the documents accompanying this application.		
Landowners Signature	Print Name	Date

**City of Burton**  
**Excavation, Removal, Fill, Deposit, or Grading Plan Submittal Checklist**

The following information shall be provided with all plans submitted to this office:

1. \_\_\_\_ Legal description and/or survey of site.
2. \_\_\_\_ A vicinity sketch to scale of 1 inch = 200 feet, indicating the site location, as well as the adjacent properties within 500 feet of the site boundaries (copy of plat).
3. \_\_\_\_ An excavation, removal, fill, deposit, or grading site plan (scale of not more than 1" =50', or scale agreeable with the director) of the property with the items below clearly labeled: (Residential submitted on letter or legal paper)
  - A. \_\_\_\_ Name, address, and telephone number of owner, developer, and petitioner
  - B. \_\_\_\_ A time schedule indicating the anticipated starting and completion dates of the development sequence and the time exposure of each area prior to the completion of effective erosion and sediment control measures.
  - C. \_\_\_\_ Existing and proposed topography at a maximum of 2-foot contours intervals.
  - D. \_\_\_\_ Location of any structure of natural feature on the site.
  - E. \_\_\_\_ Location of any structure of natural feature on the land adjacent other site and within 50 feet of the boundary line. .
  - F. \_\_\_\_ Description and location of ALL temporary and permanent soil erosion measures, with measures clearly drafted and labeled with the Mich. Unified Keying System.
  - G. \_\_\_\_ Location of any proposed additional structures or development on the site.
  - H. \_\_\_\_ Elevations, dimensions, location, extent and slope of all proposed earth change.
  - I. \_\_\_\_ Plans of all drainage provisions, retaining walls, cribbing, planting, anti-erosion devices, or other protective devices to be constructed in connection with, or as part of, the proposed work, together with a map showing the drainage area of the land tributary to the site and the estimated runoff of the area served by any drains
4. \_\_\_\_ A completed Soil Erosion and Sedimentation Control application **if necessary**.
5. \_\_\_\_ A copy of any state require permits for completing earthwork within the boundaries of a state regulated wetland and/or floodplain **if necessary**.

I hereby certify that the above information has been provided with the submitted plans.

Name of Party Preparing Checklist: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_