



City of Faribault
 208 1st Ave NW
 Faribault MN, 55021
 Phone: (507) 334-2222
 Fax: (507) 384-0509

**GRADING
 Permit Application**

Office Use Only

App. No.

Date: Tenant/Building Name (If Applicable): _____

Site Address: _____

<u>Subdivision and/or Addition</u>	<u>Block</u>	<u>Lot</u>	<u>Plat</u>	<u>Parcel</u>
_____	_____	_____	_____	_____

Applicant is: Owner Contractor Other (describe) _____

Property Owner Name: _____ MI _____ Phone: (____) ____ - _____

Last First

Address: _____ Fax #: (____) ____ - _____

City: _____ State: _____ Zip Code: _____

Contractor Company: _____ Phone: (____) ____ - _____

Name: _____ MI _____ Contr. No. _____

Last First

Address: _____ Fax #: (____) ____ - _____

City: _____ State: _____ Zip Code: _____

Engineer/Designer Company: _____ Phone: (____) ____ - _____

Name: _____ Registration No. _____

Last First MI (State of MN)

Address: _____

City: _____ State: _____ Zip Code: _____

Description of Work:

Approximate Start Date:

Approximate End Date:

No. of Cubic Yards: _____
 (Excavation or fill, whichever is greater)

Erosion Control Supervisor: _____

I hereby apply for a grading permit, and I certify that the information above is complete and accurate. The work will be in conformance with applicable laws of the State of Minnesota and ordinances of the City of Faribault. I understand this is not a permit but only an application for a permit and work is not to start without a permit. I certify that the work will be in accordance with all permit conditions and approved plans (in the case of work which requires a review and approval of plans).

 Applicant's Signature

Date:

When validated by City Engineer, this is your permit. _____
 City Engineer

Date: