

## P.O. Box 8016 Alta, Utah 84092

Phone (Town Hall): 801-363-5105

Permitting Questions: 801-363-5105

## **TOWN OF ALTA** Grading, Cut, and Fill **Permit**

PERMIT #		

Inspection Requests: 801-364-1465 This permit becomes valid upon required approvals and acceptance of required fees. **Property Address** Applicant Phone Fax City/State **Applicant Address** Zip **Property Owner** Phone Fax Owner's Address City/State Zip Phone Contact E-mail Permitting Authority - Ordinance no. 2009-0-2 I hereby certify that I have read and examined this permit and that the information provided by me is true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction **Applicant Signature** Date This permit shall become null and void if work is not commenced within 180 days, or if work is suspected or abandoned for a period of 180 days or more at any time after the work has commenced. Commencement or continuation of work shall be verified only by inspection reports from Town of Alta inspectors. All required inspections shall be requested at least two working days before they are to be made. Inspections are required before any work is covered. Please call if you need further information about when an inspection is required. Name Phone # Submittals Included: Contractor Engineer Construction Details / P Property Location Mapping Architect Erosion Control Plan Description of Work: Revegitation Plan Subdivision Plat Existing and Finsih Grades П Purpose, Use, or Occupancy of Intended Work: Other Pertinent Information: Project Start and Completion Dates: Site/Property Address Subdivision Lot# Zone Parcel # Building Official Comments/Deferrals: Office Use Only \$250 per permit PREPAID PC Date: Rec'd By: TOTAL Plan Review Ok'd Date Date: Permit Approved Date Rec'd By: