

Grading Permit

Proposed Project Name:		Project Acreage:				
Address of Proposed Proje	ct:					
Name of Applicant or Author	orized Agent(s):				
Address:						
Phone#:	Cell:	Fax:	Email:			
Name of Owner(s) (if other	than the app	olicant):				
		(If more than one owner, attach additional information for each owner to this application				
Address:		City:	State:	Zip:		
Phone#:	Cell:	Fax:	Email:			
Owner's Signature of Autho	orized to file:					
		(if more than one owner, attach the signature of each owner to this application)				
Name of Licensed Enginee	r:					
Address:		City:	State:	Zip:		
Phone#:	Cell:	Fax:	Email:			

Application Submittal Procedures

- (1) Before any Grading Permit Application can be accepted, a Preliminary Subdivision for residential or Concept for commercial *MUST* be approved for the property.
- (2) The Applicant Needs to Submit the Application
- (3) The Applicant shall create an account and submit all required information electronically through the Fairfield Town Website
 - (a) The completed application and all other required information from the checklist are outlined below.
- (4) All fees need to be Paid at the time your application is submitted.

Application Requirements

All engineering and/or surveying documents submitted for the Town to review shall be stamped by said engineer or land surveyor in accordance with the procedures of the Utah State Board for Professional Registration. If the submittal contains more than one sheet, the sheets shall be numbered in sequence and clearly indicated on each sheet. The following information, at a minimum, shall be included with the application. (additional information may be required)

Follow carefully the checklist below and initial eaby staff or not applicable to the approval process:	ach item as being co	mpleted, or put N/A if waived
	utivo muot includo o r	accon for the Cradina is
1. A narrative outlining the project. The narrative required. The narrative should also include the follows:		eason for the Grading is
 A) The amount of material to be moved and/or provided in both bank cubic yards and loose B) The number of estimated total truck loads. C) The number of estimated daily trips/truck loads. D) A completion date. 	e cubic yards.	e volumes must also be
E) Temporary vegetation protection during theF) Dust control measures.G) Traffic control plans.	time of grading.	
2. A re-vegetation plan for any disturbed lan vegetation that is to remain.	d, including slopes c	reated by the grading and any
3. A general vicinity map of the proposed sit	6	
4. A metes and bounds description of the praccurate contours of the existing ground.		hat includes property limits and
5. A map of the subject area showing elevat grading, including representative depths of cuts/fills show existing and proposed grading contours but r buildings, utility lines, curbs, asphalt, etc.	and any critical or se	ensitive lands. Plans should
6. The main haul route and a secondary hau	l route are outlined ar	nd shown on the map.
7. A plan showing the locations of retaining	walls in excess of fou	r (4) feet.
8. Any required permits where grading is adj 9. A Storm Water Pollution Prevention Plan (10. A Utah State Notice of Intent (NOI)		watercourse.
10.74 Glair Glais Hollos of Mioric (1401)		
* Please note that once a grading permit has been a acres) or Planning Commission/Town Council (perm required, and a pre-construction meeting must be s	its greater than 10 ac	res), a reclamation bond will be
Applicant(S) Owner(S) Certification		
I (we) certify under penalty of perjury that this a of this application are correct and true to the beinformation or representations submitted in coruntrue, I (we) understand that The Town of Fairlegal or appropriate action. I (we) also acknowle sections of the Fairfield Town Code and that ite are basic and minimum requirements only, and are unique to individual projects or uses. I (we) Commission, Town Council, or appointed ager make any necessary inspections thereof.	est of my (our) know nection with this ap- field may rescind ar- edge that I (we) have ems and checklists that other requiremalso agree to allow	vledge. Should any of the oplication be incorrect or by approval or take any other vereviewed the applicable contained in this application tents may be imposed that the Staff, Planning
Applicants Signature	Title	Data

For Off	ice Use Only			
Date:	/			
	TI permit completed: permit #	Date:		
	By:			
	Application fees paid			
	Fire Inspection completed: Date	By:		
	Fire Inspection fee paid			
	Utah County Health Department	Approval Number		
	Zoning:			
	Conditional Use Permit:	By:		
	Planning Commission: Approved	d: Denied	d: Dat	e:
	Comments:			
	Town Council: Approved:			
	☐ Total Fees:☐ Check #:☐ License #:		_	
_	Title Signa	ture		Date