

## **TOWN OF EASTON**

14 South Harrison Street
Easton, Maryland 21601
410-820-8822
Engineering@EastonMD.gov
www.EastonMD.gov

## **GRADING PERMIT APPLICATION**

Project Location		To Be Filled In By Town Official:	
Street Address		Permit #:	
Subdivision		Fee:	
•		Application Date:	
Zoning			
Historic District (Y/N)		Approval Date:	
Contact Information	Applicant	Durante Occupan	Combroator
C	Applicant	Property Owner	Contractor
Company/Organization			
Name		·	
Street Address			
City/State/Zip Code			
Phone Number			
E-mail .			
		License # & Expiration Date:	
	s not completed within one (1) y		f work is not started within 6 months ermit extension must be requested in
		Conservation District (SCD) and an nust be issued prior to issuing a Gra	approved Storm Water Management ding Permit.
	addition, a Project that does not		ect that does not disturb over 5,000 land area does not require SCD and
correct; (3) that he/she will cono work on the above proper	omply with all regulations of the	Town of Easton which are applicable ation; (5) that he/she grants Town	oplication; (2) that the information is hereto; (4) that he/she will perform Officials the right to enter onto the
Applicant Signature		Date	
Property Owner Signatu	ure	Date	