



Town of Mt. Airy
P.O. Box 257
869 Dicks Hill Parkway
Mt. Airy, GA 30563
Phone: (706)778-6990
Fax: (706)776-3976

**LAND DISTURBING / GRADING
PERMIT APPLICATION**

Applicant Full Name (no initials): _____

Mailing Address of Applicant: _____

Phone/Contact # _____

Property Owner (if different): _____

Mailing Address: _____

Phone/Contact# _____



LOCATION OF PROPERTY



911 Address: _____ Map & Parcel# _____



PROJECT DESCRIPTION



Project Name: _____ (attach plan check list)

Total Property Acreage: _____ Amount of Disturbed Acreage: _____

Plan Prepared by: _____ Phone: _____

I, _____, hereby certify that I fully understand the provisions of the Town of Mount Airy Soil Erosion and Sedimentation Control Ordinance and that I accept responsibility for carrying out the approved plan for the above referenced project as approved by the Town. I further grant the right-of-way entry onto this property, as described above, to the designated personnel of the Town of Mount Airy for the purpose of inspecting and monitoring the compliance with the previously mentioned ordinance.

I certify that the application and attached information provided by me is true and correct.

Applicant Signature

Date



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Soil Erosion & Sedimentation Control Plan Checklist

- ___ 1. Name, address & phone number of property owner
- ___ 2. Name & phone number of 24-hrs local contact person who is responsible for soil erosion & sedimentation control for the project.
- ___ 3. Description of existing land use at project city & description of proposed project.
- ___ 4. Size of project or phase under construction in acres.
- ___ 5. Activity schedule showing anticipated starting and completion dates for the project.
- ___ 6. Storm water & sedimentation management systems-storage capacity, hydrologic study, and calculations, including off site drainage areas.
- ___ 7. Vegetative plan for all temporary and permanent vegetative practices, including species, planting dates, seeding, fertilizer, lime and mulching rates. The vegetative plan should show options for year round seeding.
- ___ 8. Detail drawings for all structural practices. Guidelines from MANUAL FOR EROSION AND SEDIMENTATION CONTROL IN GEORGIA.
- ___ 9. Maintenance statement: EROSION AND SEDIMENTATION CONTROL MEASURES WILL BE MAINTAINED AT ALL TIMES. ADDITIONAL EROSION AND SEDIMENTATION CONTROL MEASURES AND PRACTICES WILL BE INSTALLED IF DEEMED NECESSARY BY ON SITE INSPECTION.
- ___ 10. Graphic scale and north arrow indicating mag. North.
- ___ 11. Vicinity map showing location of property and existing streets or roads.
- ___ 12. Boundary line survey.
- ___ 13. Delineation of disturbed area within project boundary.
- ___ 14. Existing and planned contours.
- ___ 15. Adjacent areas & features such as streams, lakes, properties, residences and businesses which might be affected.
- ___ 16. Existing and proposed structures and paved areas.
- ___ 17. Delineate the 50 foot buffer adjacent to state waters.
- ___ 18. Location of erosion and sedimentation control measures and practices using coding symbols from the MANUAL FOR EROSION AND SEDIMENTATION CONTROL IN GA CHAPTER 6.
- ___ 19. Signature and seal of registered or certified professional in engineering, architecture, land surveying or erosion and sedimentation control.
- ___ 20. IF NPDES N.O.I. is applicable, a copy must be provided BEFORE land disturbing activities begin.



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Official Use:

Name of Applicant: _____

Disturbing / Grading Permit #: _____

Date Submitted: _____

Plan Approved: _____ Date: _____

Approval Signature: _____

Title : _____

Plan Not Approved: _____ Date: _____

Comments: _____
