



Grading Permit #: _____
 Date Issued: _____
 Project #: _____

Grading Permit Application

Town of La Plata
 305 Queen Anne Street • P.O. Box 2268
 La Plata, MD 20646
 Main: 301-934-8421
 Planning: 301-934-8811
 Fax: 301-934-3965
www.townoflaplata.org

Please complete the information below prior to your submission. This application will be required in order to accept and process your submission. **All information must be complete or the submission will be returned to the applicant. To begin construction before a grading permit has been issued is a violation of this Ordinance.**

Contact Information									
Owner			Architect/Engineer				Contractor		
Name:	_____		Name:	_____		Name:	_____		
Company:	_____		Company:	_____		Company:	_____		
Address:	_____		Address:	_____		Address:	_____		
	City	State	Zip Code	City	State	Zip Code	City	State	Zip Code
Phone:	_____		Phone:	_____		Phone:	_____		
Email:	_____		Email:	_____		Email:	_____		

Permit Information		
Intended Use of the Site (Be Specific):		Description of Work:
Estimated Construction Cost:	_____	
Estimated CU YD Material:	_____	
Total Disturbance (LOD):	_____	
Construction Schedule (From Approved Plans)	To be Completed By	Time Period
Stripping, Stockpiling - Temporary Erosion Controls	_____	_____
Rough Grading	_____	_____
Final Grading - Permanent Erosion Controls	_____	_____
Final Seeding, Sodding and Planting	_____	_____
Other:	_____	_____
Other:	_____	_____
<p>I have carefully examined and read the above application and know the same is true and correct and that in doing this work shall comply with all applicable codes and ordinances for the Town of La Plata, Charles County and the State of Maryland, whether herein specified or not. I also hereby certify that, I am the Owner of the subject property; or I have received approval to act on behalf of the owner.</p>		
Signature:		Date:

For Office Use Only						
Payment Information			Approvals	Approved	Denied	Date
<input type="checkbox"/>	Grading & Control Costs \$0-\$1,000	\$	Planning			
<input type="checkbox"/>	Grading & Control Costs Over \$1,000	\$	Inspections			
			Operations			
Check # or Cash			Public Works			
Treasurer: _____ Date: _____			Soil Conservation	Project Number:		Issued Date:
Conditions: (if any)						