MARSHALL TOWNSHIP
GRADING PERMIT APPLICATION

Permit No. : _____
Date issued: _____

APPLICANT INFORMATION

Name: _____
Address: _____
City, State, Zip:_____
Phone:_____ Fax:_____ Email: _____
EIN or Social Security # (required if Cash Bond is Provided): _____

The applicant understands and acknowledges that all engineering review costs incurred by the Township shall be reimbursed by the applicant prior to the issuance of this permit. This permit shall expire and become null and void in six (6) months from the date of issuance if the work does not commence or in twelve (12) months from the date of issuance if the work is not completed. Requests to extend the permit time period must be submitted in writing to and approved by the Township Engineer.

_____ _____
Signature of Applicant Date

CONTRACTOR INFORMATION

Name: _____
Address: _____
City, State, Zip:_____
Phone:_____ Fax:_____ Email: _____

SPECIFICS

Location:_____
_____
Allegheny County Lot & Block Number(s): _____
Does work affect other property in any way? [ ] Yes [ ] No If yes, please explain _____
_____
_____
Date work will begin: _____ Date work will be completed:_____

Plans (maximum size 24" x 36")
Prepared by: _____ _____
Company Engineers Name
Phone:_____ Fax:_____ Email: _____
Cubic yards involved (estimate) _____ Estimated Cost: $ _____ Bond or Cash Deposit: $_____
Performance Bond Issued by: _____
Company
Received By: _____ Permit Fee: $_____
Building Code Official Check No. _____
Inspection Escrow: $ _____

This is to certify that all grading, filling etc. stipulated in the above application under permit #_____ has been completed in compliance with the approved plans and specifications.

_____ _____
Applicant's Engineer Date

Township Engineer Special Conditions:
_____
_____
_____

_____ _____
Township Engineer Date