

**CITY OF GLENNVILLE  
APPLICATION FOR LAND-DISTURBING PERMIT**

Project File #: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Permit Effective Date: \_\_\_\_\_

Permit Expires: \_\_\_\_\_

Applicant \_\_\_\_\_  
(Full Name) (Business Phone)

\_\_\_\_\_  
(Address)

Landowner \_\_\_\_\_  
(Full Name) (Business Phone)

\_\_\_\_\_  
(Address)

Plan prepared by \_\_\_\_\_

Project \_\_\_\_\_  
(Name and Description)

Location \_\_\_\_\_

Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Area \_\_\_\_\_ sq. ft.

I, \_\_\_\_\_ (Signature) hereby certify that I fully understand the provisions of the \_\_\_\_\_ City of Glennville Soil Erosion and Sediment Control Ordinance and Program, and that I accept responsibility for carrying out the Erosion and Sediment Control Plan for the above referenced project as approved by the City.

I further grant the right-of-entry onto this property, as described above, to the designated personnel of the City for the purpose of inspecting and monitoring for compliance with the aforesaid Ordinance.

Approved: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_