

CITY OF SALISBURY

Department of Infrastructure & Development
125 N. Division St., Rm. #202
Salisbury, MD 21801
Ph: 410-548-3130
www.salisbury.md

Permit #: _____

GRADING PERMIT APPLICATION

BUSINESS INFORMATION

Site Work Location: _____

Property Owner(s) Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Contractor/Developer/Engineer's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Name of Subdivision (if any) _____

City Tax Map: _____ Block: _____ Zoning District: _____

Approx. Size of Tract: _____ Sq. Ft./Acres

UTILITIES:

Public Sewer: Yes No

Public Water: Yes No

TYPE OF STORM DRAINAGE:

Storm Water Management Pond: Yes No

Curb/Gutter/Sidewalks: Yes No

Explanation of type of grading and for what purpose: _____

List steps/procedures to control erosion and sedimentation: _____

APPROX. BEGIN/END DATES OF SOIL/EARTH MOVING

Begin Date: _____ **End Date:** _____

Applicant's Name: _____ Phone: _____

Email: _____

Office Use Only

Permit Fee: \$ _____ Ck # _____

Approved By: _____
State of Maryland Soil Conservation District

Approved By: _____
Dept. of Building, Permits & Inspections