



LAND DISTURBANCE PERMIT APPLICATION

Instructions:

A properly completed application to include all required supplemental documents and payment of fees are due at the time of submittal. Original signatures are required. Incomplete applications will not be accepted nor further processed.

Applicant Name: _____ **Date:** _____

Tax Map & Parcel #(s): _____

Physical Address (if applicable): _____

Total Acreage of Parcel: _____ **Number of Disturbed Acres:** _____

Checklist:

- 1. Copy of ES&PC Plans (3 Full Size Paper Copies + 1 Digital Copy) _____
 - ES&C Plans should be no larger than 30" x 42" and drawn to scale, plus one digital copy.
- 2. Copy of Receipt showing payment of fees to GA EPD _____
- 3. Copy of Notice of Intent (NOI) from GA EPD _____
- 4. Copy of current GSWCC Level 1A Fundamentals Certification(Blue Card) or higher _____
 - Copy of certification shall be for the person conducting grading operations for this project.
- 5. Land Disturbance Bond in an amount equal to \$3,000 per acre _____
 - All bonds and sureties can be submitted in the form of security bond, irrevocable letter of credit, escrow account, or any combination thereof. These bonds will be reviewed by the Commerce Planning & Development Department and the City Attorney for compliance.
 - If any activities conducted do not comply with City standards and policies within 30 days, the City will call the bond and hire a contractor to stabilize the activity.
- 6. Completed Application _____
- 7. Copy of Water / Sewer Capacity Letter from City of Commerce (*if applicable; e.g. new taps*) _____
- 8. GA DOT Permit (*if applicable-for work proposed within ROW of State Highways*) _____
- 9. City of Commerce Fee (Due after review and approval of plans) _____



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TYPE	Description of proposed project : _____					
	<input type="checkbox"/> Single-Family Residential Home	<input type="checkbox"/> Commercial / Retail Office	Other (Please describe)			
PROJECT	<input type="checkbox"/> Home Addition	<input type="checkbox"/> Single-Family Subdivision	_____			
	<input type="checkbox"/> Pool	<input type="checkbox"/> Multi-family Development	_____			
	<input type="checkbox"/> Wall greater than 6' in height	_____				
	Name of Project or Subdivision (Note name of Former Subdivision, if any)		Lot #			
	Owner of Record (Company/Individual)					
APPLICANT	Property Address		Suite/Apt. #	City	State	Zip Code
	Property ID		Total Acreage	Acreage and Square Footage to be Disturbed		
	Applicant Name					
	Company					
CONTACT	Mailing Address		Suite/Apt. #	City	State	Zip Code
	Phone	Cell Phone	Fax Phone	E-mail		
	Contact Name (24-hour Contact: Owner's Agent / Project Manager / Project Engineer)					
	Company					
Contact Mailing Address		City	State	Zip Code		
Phone	Cell Phone	Fax Phone	E-mail			
<i>I hereby certify that all information provided herein is true and correct</i>						
Applicant Signature: Property Owner or Owner's Representative				Date: ___ / ___ / ___		