

**FOR OFFICE USE ONLY**

Permit No: _____

Permit Fee: _____

Date Issued: _____

Tax Key No: _____

EROSION CONTROL PERMIT APPLICATION**Property Address:**_____
_____**Proposed Activity:**

- ☐ New Building ☐ Grading
☐ Building Addition ☐ Trenching
☐ New Paving

Applicant Information:

Name: _____

Mailing Address: _____

Phone: _____

Email: _____

Project Description:_____
_____**Trenching Information:**

Trenching area: _____ lineal feet

Total disturbed area _____ square feet

Property Owner Information:

Name: _____

Mailing Address: _____

Phone: _____

Email: _____

The undersigned agrees to conduct the above described activities in accordance with the Wisconsin DNR Construction Site handbook, the approved Erosion Control Plan, and in strict compliance with all the provisions of the City of Cedarburg Ordinance, and to grant permission for reasonable inspections as a condition of this permit.

OWNER STATEMENT: *I agree to comply with all applicable requirements of the City of Cedarburg Municipal Code Chapter 15-2 and applicable State Codes. I understand that I am responsible for compliance with all Code requirements and any conditions of plan approval.*

Signature: _____ Date: _____

Print Name/Title: _____

Please submit this completed application to the Building Inspections department

Permit Conditions:_____

Signature: _____ Date: _____

Jeff Thoma, Building Inspector