

APPLICATION FOR GRADING PERMIT CITY OF LAKEWOOD (562) 866-9771 – 2350

PLEASE FILL OUT THE FOLLOWING INFORMATION

JOB ADDRESS:		UNIT NO.:	·		
CITY/LOCALITY:		_ CROSS – ST:			·
ASSESSOR INFORMATION I	NO.:				
FENANT:	(LAST NAME/BUSINESS NAME)	(FIRST)	(MI)		
OWNER'S NAME:	(LAST NAME/BUSINESS NAME)	(FIRST)	(MI)	OWNER/BUILDER: YES	
APPLICANT:		(FIRST)	(MI)	PHONE ()	Ext
CONTRACTOR:		(FIRST)	(MI)	LIC. NO.:	CLASS:
ARCH/ENG:		(FIRST)	(MI)	LIC. NO.:	
WORK DESCRIPTION:	·		· .		
 CUBIC YARD HANDLED:	J ANDSCAPE AREA	SQ.FT.		HECK IF SUPERVISED GRAI	OING:
WATER PURVEYOR NAME:		00.7 1.		THE STATE OF LIVINGES OF VIE	JII 40.

(THIS DOCUMENT IS TWO-SIDED)

FOR BUILDING AND SAFETY USE ONLY										
SUPRV'D GRADING:	MAP NBR:									
STATE HIGHWAY: USE ZONE:		CUBIC YARDS HANDLED:								
SPECIAL CONDITION	·									
THIS APPLICATION IS ALSO ASSOCIATED WITH THE FOLLOWING PROPERTIES:										
TRACT LOT TRACT	LOT TRACT LOT	TRACT	LOT TRAC	T LOT	TRACT	LOT				
PRINCIPAL: OR SUBDIVIDER:	(LAST NAME/BUSINESS NAME)		(FIRST NAME)		-					
TVDE (INOTELLIMENTALLIMEED	(LAST NAME/BUSINESS NAME)		(FIRST NAME)	(M.I.)						
	<u>·</u>									
ORIGINAL \$:										
RCV DATE:	· · · · · · · · · · · · · · · · · · ·	•								

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