

APPLICATION FOR EXCAVATION FOR DEVELOPMENT PERMIT

CITY OF MACOMB, ILLINOIS

No. _____

The undersigned applicant hereby applies for an Excavation Permit as required by Section 7-72 "Permit Requirements" of the City of Macomb Municipal Code

Applicant – If not property owner, must be a city of Macomb licensed contractor

Name: _____

Address: _____ City: _____

By: _____

Location of Excavation: Street Address: _____

PIN: _____

Maximum & Overall Depth of Excavation: _____

Total Square footage or acreage to be disturbed: _____

Property Description: If no street address (include lot(s), block(s) and addition):

Property Owner: Name: _____

Address: _____ City: _____

Excavation By – If applicant, state applicant, if other, please state:

Name: _____

Address: _____ City: _____

Purpose and Description of Excavation (attach site plan):

Description of filling, restoration, re-surfacing plan:

Applicant Signature: _____

Date: _____

Estimated Commencement Date: _____

Estimated Completion Date: _____

Permit Fee = \$75.00 Payment Method: _____ Payment Date: _____

Date Application Approved: _____

Approved By: _____

Comments:
