



EXCAVATION FOR DEVELOPMENT PERMIT APPLICATION  
No. \_\_\_\_\_ Fee: \$75

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: \_\_\_\_\_  
\_\_\_\_\_