



TROUP COUNTY
BUILDING INSPECTION, ZONING
& PLANNING DEPARTMENT

100 Ridley Avenue
LaGrange, GA 30240
Phone: (706) 883-1650
Fax: (706) 883-1653

APPLICATION LAND DISTURBING PERMIT (50.00 FEE)

Project File #: _____

Date of Application: _____

Permit Effective Date: _____

Permit #: _____

Applicant: _____
(Full Name) (Business Phone)

(Address) (City) (State) (Zip Code)

Landowner: _____
(Full Name) (Business Phone)

Location of Project: _____

(Address) (City) (State) (Zip Code)

Plan prepared by: _____

Project: _____
(Name & Description)

Tax Map: _____ Block: _____ Parcel Number: _____

I, _____, hereby certify that I fully understand the provisions of
(Signature)

the Troup County Erosion and Sediment Control Ordinance and Programs, and that I accept responsibility for carrying out the Erosion and Sediment Control Plan for the above referenced project by the County.

I further grant the right-of-entry onto this property, as described above to the designated personnel of Troup County for the purpose of inspecting and monitoring for compliance with above mentioned ordinance.

(Approved Troup County)

(Date)