

APPLICATION FOR LAND DISTURBING PERMIT

PROJECT FILE #: _____
DATE OF APPLICATION: _____
PERMIT EFFECTIVE DATE: _____
PERMIT #: _____

Applicant: _____
(Full Name) (Business Phone)

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

Landowner: _____
(Full Name) (Business Phone)

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

Plan Prepared by: _____
Project: _____
(Name & Description)

Location of Project: _____
Tax Map: _____ Block _____ Parcel Number: _____ Acre = _____ SQ. FT.

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

(Approved Troup County)

(Date)