

FOR OFFICIAL USE ONLY
Application No
Date received
Decision/Date:

APPLICATION FOR PERMIT TO CARRY OUT EARTH WORKS

SE	CTION A
1.	NAME OF APPLICANT (person for whom works will be undertaken). SURNAME (Mr/Mrs/Miss): OTHER NAMES: POSTAL ADDRESS: TEL #: E-MAIL ADDRESS:
2.	Location of proposed earthwork(s) & Property Number:
3.	(a) Is the work related to a Planning Application/Approval? Yes:
4.	Type of works (tick): (a) Terracing (b) Leveling/grading (c) Site Clearing (d) Excavation Others (specify): Proposed date of commencement of works:
5.	State measure(s) to be taken to contain/minimize erosion and soil degradation.
6.	State type of machinery to be used:
7.	Contractor selected for the works: License type/category: Contact address and telephone #:
	CTION B APPLICATION The hereby apply for an Earthworks permit as shown on the attached location, site plan and drawings (where applicable).
Sig	nature

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SE	SECTION C		
1.	NAME OF PLANNING AUTHORITY OFFICER/ASSESSOR:		
	DATE SITE VISITED:		
8.	BRIEF DESCRIPTION OF PROPERTY/TERRAIN CONDITIONS (attach photos):		
9.	PROXIMITY TO ROADS/WATER BODIES/BUILDINGS/ETC:		
10.	RECOMMENDATION:		
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