

Village of Bayside FILL/EXCAVATION Permit

The undersigned hereby applies for a filling/excavating permit in accordance with Section 14-6 of the Municipal Code of the Village of Bayside.

PROPERTY OWNER NAME:		
LOCATION OF FILLING/EXCAVATING OPERATION:		
TAX KEY NUMBER(S) OF PROPERT	Y:	
NAME OF CONTRACTOR(S) AND SUBCONTRACTORS:		
ADDRESS(S):		
24 HOURS A DAY TELEPHONE NUM	MBER(S):	
EXPLAIN THE PURPOSE OF THE FILL OR EXCAVATION OPERATION:		
DESCRIPTION OF WORK TO BE DO	NE. PLEASE ATTACH A MAP OF T	HE AREA:
PROPOSED ROUTE FOR HAULING:		
TYPE OF TRUCKS:	SINGLE AXLE :	MULTI-AXLE
SIZE OF TRUCKS:	LICENSE NUMBERS OF ALL TRU	CKS:
EQUIPMENT, OTHER THAN TRUCKS	S, TO BE USED IN THE OPERATION	
NUMBER OF DAYS N	NUMBER OF LOADS@\$	PER/ LOAD
TIME OF HAULING (7AM TO 5PM MC	ONDAY – FRIDAY ONLY)	
Corps of Engineers ar 2. Obtaining stormwater and e		Municipal Code
PROPERTY OWNERS AUTHORIZAT	TION	
SIGNATURE DATE		
For office use only: □ Provided a letter of credit/financia □ Taxes are current on the property □ Provided before and after typogra □ Provided proof of suitable access □ Approval given	y aphy drawings s, including licenses or permission	DATE: DATE: DATE: DATE: DATE: