CITY OF FULLERTON PUBLIC WORKS DEPARTMENT GRADING PERMIT APPLICATION

303 W. Commonwealth Ave. Fullerton, CA 92832 / Main line: 714-783-6845 * This information is required to process the application.

*PROJECT ADDRESS:				*ACRE	AGE:
TDACT NO.	PARCEL N	· O.			
TRACT NO:	PARCEL	O:			
*PERMIT TYPE APPLIED FOR				*PI.AN	PAGES:
Rough Grading Permit Precise Gradin	ng permit Priority WQMP	Non Drie	ority WQMP		TAGES.
Rough Grading Fermit Freeise Gradin	ing permit Priority w Qivir	Non File	offity w Qivif		
*PROJECT INFORMATION:	COMMERCIAL	RES	IDENTIAL		
*JOB DESCRIPTION					
JOD DESCRIPTION					
*CUT(CY) FILL (CV) * IMPORT(CY) * IMPORT(CY) EXPORT (
*OVER EXCAVATION (CY)	· · · · · · · · · · · · · · · · · · ·		CY) EXPORT (
REQUIRED RETAINING WALL:	YES	YES)	
*INCLUDED SOIL OR GEOTECHICAL	REPORT: SET(S	S) Y	ES (PAGES)	NO
n (elebeb soil on element	JAEL GALL	3) 1.		THOLD)	110
INCLUDED HYDROLOGY REPORT:	SET(S)	YES (PA	GES)	NO
DEQUIDED CTODMWATED DOLL HE	ON DDEVENTION DE AN (CV	(DDD)	CET(C)	VEC	NO
REQUIRED STORMWATER POLLUTI	ON PREVENTION PLAN (SW	PPP)	SET(S)	YES	NO
*APPLICANT INFORMATION	A DDI ICANIT	2C NIAME.			
COMPANY NAME:ADDRESS:			STA		
PHONE #	EMAIL ADDRESS		51A	.IEZII	
*PROPERTY OWNER INFORMATION					
OWNER'S NAME					
ADDRESS:			STATI	EZIP_	
PHONE:	EMAIL ADDRESS				
*CIVIL ENGINEER INFORMATION	ENIONIEED?				
COMPANY NAME:					
ADDRESS:PHONE #				I EZII	
STATE LICENSE NUMBER:	EMAIL ADDRESS	EXP.			
SOIL ENGINEER OR ENGINEERING (GEOLOGIST INFORMATION				
COMPANY NAME:					
ADDRESS:	CITY		S	TATE	ZIP
PHONE #	EMAIL ADDRESS				
STATE LICENSE NUMBER:		EXP			
CONTRACTOR INFORMATION					
COMPANY NAME:					
ADDRESS:					
PHONE #					
STATE LIC.#					
BUS.LIC.#	PRINTED NAME DEDOCT	EXP			
* SIGNATURE OF PERSON FILLING OUT FORM:	*PRINTED NAME PERSON OUT FORM:	FILLING	*DATE:		
331 1 34min	JOI I JAMIA				