

# GRADING PERMIT APPLICATION

Howard County Maryland  
Department of Inspections, Licenses and Permits  
3430 Court House Drive, Ellicott City, MD 21043  
Licenses & Permits (410) 313-2455 Inspections (410) 313-1855

Site Address: _____ City: _____ State: _____ Zip: _____ Subdivision: _____ Tax Map: _____ Acreage: _____ Grid: _____ Block: _____ Lot: _____ Parcel: _____ Section: _____ Zone: _____ Area: _____ Census Tract: _____ File: _____	Property Owner's Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Phone: _____ Email: _____  Contractor Company: _____ Contact Person: _____ Address: _____ City: _____ State: _____ Zip Code: _____ License No: _____ Phone: _____ Email: _____
--	--

Existing Use _____ Proposed Use _____ Proposed Work _____ Total Area Disturbed (Acreage / Sq Ft) _____ Total Site Area (Acreage / Sq Ft) _____ Cost of Work \$ _____ Plan Number F / SDP / GP _____ Grading Surety Amount \$ _____ Utility Trenching (Ft) _____ Watershed Code _____	<b>***** PRIOR APPROVALS REQUIRED *****</b> (ATTACH COPIES OF ALL APPLICABLE APPROVALS)  Developer Agreement No. _____ Date Exec. / / Forest Conservation Agreement No. _____ MDE Waterway Construction Permit No. _____ MDE Non-Tidal Wetland Permit No. _____ MDE Water Quality Certification _____ MDE NPDES Notice of Intent No. _____ US Army Corps of Engineers Wetland Permit No. _____
---	--

**I CERTIFY THAT THIS APPLICATION IS CORRECT AND I HAVE THE AUTHORITY TO MAKE SUCH APPLICATION; AND I AGREE TO COMPLY WITH ALL REQUIREMENTS OF TITLE 3, SUBTITLE 4. OF THE HOWARD COUNTY CODE.**

\_\_\_\_\_  
Signature – Owner/Authorized Agent (Date) Print Name  
Email Address \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### FOR OFFICE USE ONLY

DEPT OF PLANNING & ZONING:  
LANDSCAPE SURETY REQUIRED (Y/NA) \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_  
DPZ FOREST CONSERVATION, WETLAND, STREAMS, STEEP SLOPE VERIFICATION \_\_\_\_\_  
PROPERTY ID NO: \_\_\_\_\_ CASH RECEIPT NO. # \_\_\_\_\_ INITIALS \_\_\_\_\_ DATE \_\_\_\_\_  
GRADING PERMIT NO: \_\_\_\_\_ DPZ APPROVAL: \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
DATE RECEIVED: \_\_\_\_\_  
FEE: \_\_\_\_\_  
CHECK# \_\_\_\_\_ APPROVAL: \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
VALIDATION NUMBER: \_\_\_\_\_  
COPIES: \_\_\_\_\_ WHITE – DILP \_\_\_\_\_ YELLOW – SEDIMENT CONTROL \_\_\_\_\_