



City of Shelby Zoning Permit *Grading Only*

Please **PRINT** the following information clearly:

APPLICANT

PROPERTY OWNER

Name: _____

Name: _____

Address: _____

Address: _____

Telephone Number: _____

Telephone Number: _____

Address of the Property Being Graded: _____

Tax Map Parcel Number: _____ - _____ - _____

Total Acres in the Tract: _____ Total Acres to be Graded: _____

If the total acreage to be graded exceeds 1.0, have you obtained a Sedimentation and Erosion Control Permit from the North Carolina Division of Land Quality? _____

Date Grading Will Begin: _____ (must be a minimum of 5 working days from the date of application)

I hereby certify that the information provided hereon is, to the best of my knowledge, correct and complete. I will ensure that all adjacent and nearby public streets remain clear and free of dirt, mud, and debris resulting from my grading activities. I understand that it is my responsibility to contact North Carolina ONE CALL, 1-800-632-4949 prior to grading. I further understand that I am responsible for any and all damage to city property (not covered by ONE CALL) resulting from grading activities and that I must contact the City at 704-484-6866 immediately if any such damage occurs.

Applicant's Signature

Date

******DO NOT WRITE BELOW THIS LINE******

City approval is for zoning compliance only. The City assumes NO responsibility for the quality of work done and makes no claim that the work proposed meets other local, state, or federal laws which may apply.

Zoning Officer

Date