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Land Disturbance Permit Application

Permit File # _____ Fee (40\$/ac; 200 Minimum): _____ Application Date: _____

Permit Effective Date: _____ Permit Expires: _____

Applicant

Full Name: _____ Business Phone: _____

Address: _____

Land Owner

Full Name: _____ Business Phone: _____

Address: _____

Plan Prepared by: _____

Project: _____

Location _____

Tax Map: _____ Parcel: _____ Area = _____ sq. ft.

I, _____, hereby certify that I fully understand the provisions of the Greene County Erosion
(Signature)

and Sediment Control Ordinance and Program, and that I accept responsibility for carrying out the Erosion and Sediment Control Plan for the above referenced project as approved by the County.

I further grant the right-of-entry onto this property, as described above, to the designated personnel of Greene County for the purpose of inspecting and monitoring for compliance with the aforesaid Ordinance.

(Local Program Administrator)

(Date)

(Other Official)

(Date)