

VILLAGE OF HAMILTON
3 Broad Street, P.O. Box 119
Hamilton, NY 13346
(315) 824-1111/(315) 824-0922
www.hamilton-ny.gov
Don Forth, Code Enforcement Officer

Fee \$50.00

Examined _____ 20 ____
Approved _____ 20 ____
Denied a/c _____

County of Madison
Permit No. _____ 20 ____

Application for Soil Excavation, Grading and Filling

INSTRUCTIONS

APPLICANT'S NAME AND ADDRESS: _____

1. General Statement of Proposed Excavation, Grading, or Filling:

2. Owner's Name and Address (if different than applicant above):

3. Owner's Telephone Number: _____

4. Name, Address, and Telephone Number of Person or entity performing work:

5. The following additional items are submitted herewith as required pursuant to Section 5 of the Village of Hamilton Soil Excavation, Grading, and Filling Control Law:

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() A. Name, address and telephone number of the owner, developer, petitioner and local representative. _____

() B. A vicinity sketch at the scale of not more than 1" = 200' indicating the site location as well as adjacent properties within 500' of the site boundaries, showing relationship to any water course or drainage way. _____

() C. Existing topography extending at least 50' beyond site boundary showing 2-foot contours of the area to be modified. _____

() D. Location and description of any proposed structures or development on the site, including physical limits of each proposed land disturbance and all proposed and permanent soil erosion control measures. _____

() E. Direction of drainage flow and plans for siltation control. _____

() F. Plans for dust control. _____

() G. Hours of operation and duration of proposed work, including a specific completion date. _____

() H. Plans for suitable replacement of ground cover, including a specific completion date. _____

() I. An agreement executed by all owners of record, in recordable form, giving right of entry to agents or employees of the Village, or others acting on the Village's behalf, to enter upon the property upon failure of performance and permitting the Village to complete the work as needed. _____

() J. If the proposed land disturbance meets any SEQRA Type-1 Action thresholds or Unlisted criteria, a completed Part I of the Long or Short SEQR Environmental assessment Form, as applicable. _____

() K. If required by the Code Enforcement Officer, storm drainage plans. _____

() L. If proposed project is in a flood plain or wetland, refer to Local Law #2 & #4. _____

() M. The property upon which the proposed work is to take place is located at:

() N. The work site area is owned by: _____

() O. The tax parcel number for the property where the proposed work is to take place is:

I, the below signed hereby affirm that I have thoroughly read all of the foregoing and know the contents thereof to be true under the penalties of perjury.

Date: _____

Signature: _____

(APPLICANT)