



P.O. Box 8016
Alta, Utah 84092
Phone (Town Hall): 801-363-5105
 Permitting Questions: 801-363-5105
 Inspection Requests: 801-364-1465

TOWN OF ALTA Grading, Cut, and Fill Permit

PERMIT #

This permit becomes valid upon required approvals and acceptance of required fees.

Property Address _____

Applicant	_____	Phone	_____	Fax	_____
Applicant Address	_____	City/State	_____	Zip	_____
Property Owner	_____	Phone	_____	Fax	_____
Owner's Address	_____	City/State	_____	Zip	_____
Contact	_____	Phone	_____	E-mail	_____

Permitting Authority - Ordinance no. 2009-0-2

I hereby certify that I have read and examined this permit and that the information provided by me is true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction

Applicant Signature _____

Date _____

This permit shall become null and void if work is not commenced within 180 days, or if work is suspected or abandoned for a period of 180 days or more at any time after the work has commenced. Commencement or continuation of work shall be verified only by inspection reports from Town of Alta inspectors. All required inspections shall be requested at least two working days before they are to be made. Inspections are required before any work is covered. Please call if you need further information about when an inspection is required.

	Name	Phone #	Submittals Included:
Contractor	_____	_____	
Engineer	_____	_____	Construction Details / P <input type="checkbox"/>
Architect	_____	_____	Property Location Mapping <input type="checkbox"/>
Description of Work: _____ _____			Erosion Control Plan <input type="checkbox"/>
			Revegetation Plan <input type="checkbox"/>
			Subdivision Plat <input type="checkbox"/>
			Existing and Finsih Grades <input type="checkbox"/>
Purpose, Use, or Occupancy of Intended Work: _____ _____			Other Pertinent Information: _____ _____
Project Start and Completion Dates: _____ _____ _____			
Site/Property Address _____ _____			
Subdivision		Lot #	
Zone _____		Parcel #	
Building Official Comments/Deferrals: _____ _____ _____			
			Office Use Only
			Fee: \$250 per permit
			PREPAID PC
		Date: _____	Rec'd By: _____
Plan Review Ok'd		Date: _____	TOTAL
Permit Approved		Date: _____	Date: _____ Rec'd By: _____