



CHEROKEE COUNTY

Building Safety

110 Railroad Ave.
Gaffney, SC 29340

Office 864-487-2561

Fax 864-902-1100

GRADING/LAND DISTURBANCE PERMIT APPLICATION

Permit Number: _____

SECTION 1

Date of Application: _____

Applicant's Name: _____

Applicant's Mailing Address: _____

Applicant's Phone Number: _____

Project Name: _____

Tax Map Number: _____

Address/Location of Project: _____

Estimated Cost of Project: _____

Nature of Work: _____

DHEC Permit # _____

Total Acreage of Site: _____ Number of Disturbed Acres: _____

Anticipated Start Date: _____ Anticipated Completion Date: _____

Nearest receiving waterbody: _____

Distance to nearest receiving waterbody: _____

Is property within a Flood Zone? YES _____ NO _____ (Classification)

FEMA Panel Number: _____

Are there any freshwater wetlands located on the property? _____

If YES, have the wetlands been delineated? _____

Are any wetlands being impacted by the project? _____

Is this part of a larger common plan for development or sale? _____

Will adjacent properties and utilities be protected during and after operation? (i.e. Shoring, erosion control, stormwater system etc.) YES _____ NO _____

Are site plans included with this application, showing existing conditions, proposed conditions, proper stormwater management and erosion control methods, etc.? YES _____ NO _____

OVER

SECTION 2

A.) Property owner of record: _____

Address of owner: _____

Phone (day): _____ (mobile) _____

B.) Person financially responsible for the land disturbing activity, if different from above: _____

Address of owner: _____

Phone (day): _____ (mobile) _____

C.) Agent or Contact person (IF APPLICABLE): _____

Address of owner: _____

Phone (day): _____ (mobile) _____

D.) Engineer, Technical representative or firm (IF APPLICABLE): _____

Address of owner: _____

Phone (day): _____ (mobile) _____

E.) Contractor or operator (if known): _____

Address of owner: _____

Phone (day): _____ (mobile) _____

SECTION 3

I hereby certify that all land disturbing activities and associated work pertaining to this site shall be accomplished pursuant to and in keeping with the terms and conditions of the approved plans. I also certify that a responsible person will be assigned to the project for day-to-day control. I certify under penalty of law that this document and all attachment were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

PRINT NAME
OWNER/PERSON FINANCIALLY RESPONSIBLE

SIGNATURE
OWNER/PERSON FINANCIALLY RESPONSIBLE