



**Charter Township of Marquette**  
 1000 Commerce Drive, Marquette, Michigan 49855  
 Phone: 906-228-6220 • Fax: 906-228-7337  
 www.marquettetownship.org



## Application for Grading Permit

*\*NOTE: This Application must be completed and submitted to the Marquette Township Offices  
 \*Be sure to complete ALL sections of this form. Please Print or type.*

**Application Type:**

<input type="checkbox"/> New	<input type="checkbox"/> Renewal	<input type="checkbox"/> Modification
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**Project Name / Proposed Site Name**

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**Applicant Information**

Name:		Address:	
Business Name:			
Phone:	Fax:	Name of Contact Person:	Contact Phone:
If Applicant is not the Owner, state the Applicant's relationship to the Owner ( <i>i.e. purchaser, land contract vendee, owner's designated agent, etc.</i> ):			
E-mail Address:			

**Property Owner**

Name:		Address:	
Phone:	Fax:	Name of Contact Person:	Contact Phone:
E-mail Address:			

**Engineer**

Name:		Address:	
Phone:	Fax:	Name of Contact Person:	Contact Phone:
License Number:			
E-mail Address:			

**Contractor**

Name:		Address:	
Phone:	Fax:	Name of Contact Person:	Contact Phone:
E-mail Address:			

**Permission**

If Applicant is not the Property Owner, does the Applicant have the Property Owner's permission?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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**Property Information**

Address:		Zoning District:
Legal Description(s) <i>(attach pages as necessary)</i> :		
Property / Parcel I.D. Number(s): <i>(found on tax bill)</i> <b>52-08-</b> - -	Property / Parcel I.D. Number(s): <b>52-08-</b> - -	Property / Parcel I.D. Number(s): <b>52-08-</b> - -
Total Site Acreage:	Description of all existing and proposed uses of property <i>(attach pages as necessary)</i> :	
Property Dimensions:		
Proposed Grading Change <i>(attach pages as necessary)</i> :		

**Project Information**

Estimated Time for Completion <i>(days)</i> :	Estimated Excavation/Cut <i>(Cu Yd)</i> :
Estimated Embankment/Fill <i>(Cu Yd)</i> :	

**Planned days and hours of operation**

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**Estimated blasting days, times and frequency**

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**Applicant:**

**I certify that the information I have provided is true to the best of my knowledge.**

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Applicant's Name (print): \_\_\_\_\_

**Property Owner:**

**I certify that the information I have provided is true to the best of my knowledge.**

Signature of Owner: \_\_\_\_\_

Date: \_\_\_\_\_

Owner's Name (print): \_\_\_\_\_

**OFFICIAL USE ONLY**

Official Receiving Application *(please print)*: \_\_\_\_\_

Date: \_\_\_\_\_

Application:  Approved  Not Approved

Reason:  Incomplete Application  Other

Date: \_\_\_\_\_

Fee(s) Paid:  Yes  No

If Yes, Amount Paid: \_\_\_\_\_

Signature of Zoning Administrator: \_\_\_\_\_

Date: \_\_\_\_\_