

Union Township
3904 Finleyville-Elrama Road
Finleyville, PA 15332

Phone: 724-348-4229
Fax: 724-348-8234

No. _____
Date _____
Official Use Only

GRADING PERMIT APPLICATION
(SEE ORDINANCE NO. 72)

Description of Property: _____

Owner of Property: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Deed Book Vol. _____ Page _____

Plan Prepared
by (Engineer): _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

General Description of Work to be performed: _____

Primary purpose of Grading: _____

Amount of Earthwork Involved. _____ Cubic Yards

Area of Property Disturbed. _____ Square Feet _____ Acres

Will any Material be removed from the Site? Yes No

If yes, list all roads to be used and location of disposal site. _____

Will any material be hauled to the Site? Yes No

If yes, list all roads expected to be used and describe the hauled material. _____

Explain how the slopes and disturbed areas will be treated? _____

Explain how the surface water will be accommodated? _____

Will any coal be uncovered during the above grading operation? Yes No

If yes, complete the following:

Owner of the coal: _____

Deed Book Vol. _____ Page: _____

State Mining Permit No. _____ Drainage Permit No. _____

List all Bonds Posted with State: _____

What roads will be traveled to remove Coal? _____

Is the removal of coal a requirement or necessity to properly complete the proposed project?

Yes No

If yes, Please provide a statement by an Engineer registered by the Commonwealth of Pennsylvania attesting to the necessity or requirement of coal removal to the integrity of the project.

Owner's Estimate of Total cost of Project? \$ _____

APPLICANT: Name: _____
For OWNER

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Fax No. _____

TO BE COMPLETED BY TOWNSHIP ENGINEER

Date Received _____

Comments: _____

Grading Permit Fee: _____

Inspection Fee: _____

Bond Required: _____

APPROVED:

REJECTED: Date _____

BY: _____ Township Engineer

TO BE COMPLETED BY ZONING OFFICER

Date Received: _____

Permit Issued: _____

Inspectors Fee: _____

Bond: _____

Special Provisions, if any _____

APPROVED:

REJECTED: Date _____

BY: _____ Zoning Officer