

**GRADING PERMIT
PERMIT APPLICATION**

City of Temple
P.O. Box 160 Temple, GA 30179
(770) 562-3369 FAX (770) 562-9440

Inspection Request Line: (770) 830-5861 *(Requires 24 Hour Notice)*

Land Map Number _____

BUILDING PERMIT # _____

Parcel Number _____

DATE _____

Street Address: _____

Grading Contractor: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

State License Holders Name _____ State Lic.# _____

ITEM

TOTAL

Disturbed Area:

Less than 1 Acre
1 and above Acres

Total acreage to be entered
in Permit Calculator

Total: _____

TOTAL PERMIT COST: _____
(From Permit Calculator)

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All work shall conform to the latest edition of the Soil and Water Conservation Code, Environmental Protection Division Codes and to applicable City Ordinances. The undersigned states that the facts set forth in this application are true and correct.

Date: _____ Signed: _____

.....
Office Use Only

Electrical Permit: () Paid
() Approved
() Denied

Date: _____ Clerks Initials: _____

Reason: _____

—————→ This permit only valid with accompanying BUILDING PERMIT ←————