



**Town of Platteville**  
 400 Grand Avenue  
 Platteville, CO 80651  
 (970) 785-2245 Phone (970)785-2476 Fax  
[www.plattevillegov.org](http://www.plattevillegov.org)

For use by Town of Platteville Staff	
Date Received	
Method of Payment	
Date Issued	
Permit Number	

## Grading and Excavation Permit Application

<b>PERMIT FEE \$50.00</b> <b>PLUS</b> <b>Town Engineer's review and inspection</b>	Paid By: <input type="checkbox"/> Check <input type="checkbox"/> Cash  Receipt NO. _____	Application Dated: _____
<b>Applicant Information:</b>		<b>Property Owner Information:</b>
Applicant's Name:	Business License No.:	Property Owner's Name:
Company Name:	Cell Phone:	Property Owner's Phone Number:
Applicant's Mailing Address:	Office Phone:	Property Owner's Mailing Address:
	Fax Number:	
<b>Project information:</b>		
Project Name:	Start Date:	
Project Address:	Subdivision:	Lot:      Block:
Description of Work:		
<b>Plans, Reports and Additional Permits (check all that apply):</b>	<b>Utility Agency Approvals: (Required if Box is Checked)</b> If one of the following boxes is checked, applicant must submit plans to the agency indicated for review and approval prior to issuance of the Excavation and Grading Permit.	
<input type="checkbox"/> Town of Platteville Grading Plan Required (approval by Town Engineer needed before permit is granted) <input type="checkbox"/> Drainage Report and Plan <input type="checkbox"/> Erosion Control Plan Required <input type="checkbox"/> Master Utility Plan Required <input type="checkbox"/> Traffic Control Plan Required <input type="checkbox"/> CDPHE Stormwater Discharge Permit (Over 1 acre of disturbance) <input type="checkbox"/> CDOT Utility Permit <input type="checkbox"/> CDOT Access Permit <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input type="checkbox"/> Town of Platteville Water    by: _____ Date: _____ <input type="checkbox"/> Town of Platteville Sewer    by: _____ Date: _____ <input type="checkbox"/> Telephone                            by: _____ Date: _____ <input type="checkbox"/> Cable                                    by: _____ Date: _____ <input type="checkbox"/> Gas                                        by: _____ Date: _____ <input type="checkbox"/> XCEL (Electric)                    by: _____ Date: _____ <input type="checkbox"/> Central Weld Water District by: _____ Date: _____ <input type="checkbox"/> Other _____	

**\* Make sure ORDER from Public Works Director & Town Engineer is also complete.**