

EXCAVATION/FILL PERMIT

TOWN OF EMPIRE, CO

PO Box 100, Empire CO 80438
(303) 569-2978 • (303) 569-2282 (Fax)
clerk@empirecolorado.us

Date: _____ Application No. _____ Permit No. _____

PERMIT FEE \$100.00

APPLICANT
NAME _____ Phone _____

MAILING ADDRESS _____

PROOF OF INSURANCE CARRIER _____

HAVE YOU CALLED 811 FOR UTILITY LOCATES? _____

LOCATION OF WORK _____

SIZE (width, length, depth and grade) _____

REASON FOR WORK

TYPE OF SURFACE TO BE CUT (EXCAVATION) _____

TIME SCHEDULE:

START DATE _____ LENGTH OF TIME EXCAVATION WILL REMAIN OPEN _____

DATE CUT WILL BE BACKFILLED _____ PAVED OR REPAVED _____

DATE ALL WORK WILL BE COMPLETED _____

STREET ADDRESSES OF ALL ABUTTING PROPERTY WHICH WILL BE AFFECTED (applicant must notify 24 hrs. in advance of work)

The applicant hereby requests the Town of Empire to issue permit to:

APPLICANT _____
(If different from owner-*also must submit Landowner Authorization Form)

- I certify that the information I have provided is true and correct to the best of my knowledge.
- I have read, understand, and will comply with the above information and attached documentation.
- Any and all changes to the proposed excavation/fill require notification of the Town's Public Works Department.

Owner/Applicant _____ Date _____

OR TOWN USE ONLY:

APPROVED: _____
Date _____

PERMIT FEE \$100.00 DATE PAID _____ RECEIPT # _____ RECEIVED BY _____

ACCEPTED: _____
Town Clerk _____ Date _____