



CLEARING AND GRADING PERMIT APPLICATION

PERMIT # _____

City of Hutto Development Services
500 W. Live Oak Street Hutto TX 78634
512-759-3479 Planning
512-759-4038 Engineering
512-846-2640 Building & Code Enforcement
planning@huttotx.gov
building@huttotx.gov
www.huttotx.gov

PROJECT ADDRESS: _____ PROJECT NAME _____

Legal Description: Lot _____ Block _____ Subdivision Name: _____

Acreage of area to be disturbed: _____

Number of non nuisance trees to be removed: _____

Is property within FEMA Special Flood Hazard Area? [] No [] Yes

Is property within Old Town? [] No [] Yes If yes, has a Certificate of Appropriateness been approved? [] No [] Yes

SPECIAL CONDITIONS:

- No work may begin without an approved permit.
Construction shall be limited to clearing and grading activities within the area shown on the associated plans.
Erosion controls shall be in place prior to any grading or construction activities.
Owner to obtain all necessary permits to comply with local, state and federal requirements.
Applicant shall revegetate all disturbed areas prior to removal of erosion control measures.
Permit expires if no work has begun within six (6) months of issuance date.

The following are required for the submittal of a Clearing and Grading Permit.
For more details on these requirements, contact the Building Division at 512-846-2640.

Please check each box confirming that the requested information is included.

- Applicant has attended a Pre-Submittal meeting with City staff
All applicable fees have been paid; see fee schedule
Master Application completed
One (1) digital version of the Grading and Drainage Plan
Two (2) full size plan sets (22" x 34") of the Grading and Drainage Plan
One (1) digital version of the Erosion Control Plan
Two (2) full size plan sets (22" x 34") of the Erosion Control Plan
One (1) digital version of the Tree Survey
Two (2) full size plan sets (22" x 34") of the Tree Survey

I VERIFY THAT I AM SUBMITTING ALL OF THE REQUIRED DOCUMENTS FOR THIS PROJECT. I HAVE COMPLETED THE CHECKLIST AND I UNDERSTAND THAT FAILURE TO SUBMIT ALL OF THESE REQUIREMENTS COULD RESULT IN MY APPLICATION FOR PLAN REVIEW NOT BEING ACCEPTED.

APPLICANT NAME: _____

APPLICANT SIGNATURE: _____ DATE: _____



CLEARING AND GRADING
MASTER APPLICATION

PERMIT # _____

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512-759-3479 Planning
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512-759-5962 Fax
planning@huttotx.gov
building@huttotx.gov
www.huttotx.gov

PROJECT ADDRESS: _____ PROJECT NAME _____

APPLICANT INFORMATION (property owner or authorized agent) This will be the City's official contact

Business Name _____

Name _____ Phone _____

Address _____

City, State, Zip _____ Email _____

PROPERTY INFORMATION

Address _____

Legal Description Lot(s) _____ Block _____ Subdivision _____

Deed Reference Volume _____ Page(s) _____ or Document No. _____

City Limits or ETJ _____ Current Zoning District _____

PROPERTY OWNER INFORMATION

Name _____ Phone _____

Address _____

City, State, Zip _____ Email _____

PROPERTY OWNER CONSENT/AGENT AUTHORIZATION

By my signature I hereby affirm that I am the property owner of record, or if the applicant is an organization or business entity, that authorization has been granted to represent the owner, organization or business in this application. I certify that the preceding information is complete and accurate, and it is understood that I agree to the submittal of this application. Additionally, my signature below indicates my awareness of the fee(s) required at the time of application submittal and that this fee(s) is non-refundable even in the event of application withdrawal.

By signing this form, the owner of the property authorizes the City of Hutto to begin proceedings in accordance with the process for the type of application indicated on page one of this application. The owner further acknowledges that submittal of an application does not in any way obligate the City to approve the application and that although City staff may make certain recommendations regarding this application, the City Council may not follow that recommendation and may make a final decision that does not conform to the staff's recommendation.

Property Owner Signature _____

Property Owner Printed Name _____

Date _____

THE STATE OF TEXAS

COUNTY OF _____

Before me, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purposes and considerations therein expressed.

Given under my hand and seal of office this _____ day of _____, 20____ A.D.

Notary Public Signature _____

Notary Public Printed Name _____

(Seal)

If there are multiple property owners attach separate page(s) with notarized signature(s)