



**COMMUNITY DEVELOPMENT DEPARTMENT**

300 First Street  
Woodland, CA 95695-3413  
(530) 661-5820  
FAX (530) 406-0832

**GRADING PERMIT APPLICATION**

Work Location Address: \_\_\_\_\_

Name of Owner: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

APN #: \_\_\_\_\_

Owner's Phone #: \_\_\_\_\_

Name of Applicant/Contractor: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Applicant's Phone #: \_\_\_\_\_

Description of Work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cubic Yards to be moved: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date