



OFFICE
USE
ONLY

EXCAVATION PERMIT APPLICATION

(Applications are due by 12pm the Wednesday prior to the Planning & Zoning Meeting)

APPLICANT / AGENT* _____ PHONE NUMBER _____

MAILING ADDRESS _____

E-MAIL _____ FAX _____

OWNER _____ PHONE NUMBER _____

MAILING ADDRESS _____

E-MAIL _____ FAX _____

***All City correspondence will be with the applicant/agent only**

LOT INFORMATION

PARCEL ID # _____ TAX ID # _____

PROPERTY ADDRESS _____

LEGAL DESCRIPTION _____

LOT _____ BLOCK _____ SUBDIVISION _____

SECTION _____ TOWNSHIP _____ RANGE _____ ACRES _____

CURRENT ZONING _____

SURROUNDING ZONING: NORTH _____ SOUTH _____ EAST _____ WEST _____

PROPOSED EXCAVATION – PLEASE DESCRIBE THE PURPOSE OF THE EXCAVATION AND THE MATERIALS TO BE MOVED, ADDED, AND/OR REMOVED. INCLUDE TYPE, QUANTITY, SOURCE AND DESTINATION OF MATERIALS.

TYPE _____

QUANTITY _____

SOURCE/DESTINATION _____

City of Hill City, SD ♥ P.O. Box 395 Hill City, SD 57745 ♥ (605) 574-2300

www.hillcitysd.org

ENGINEER/ARCHITECT

NAME _____ PHONE NUMBER _____

MAILING ADDRESS _____

E-MAIL _____ FAX _____

IS THE PROPERTY LOCATED WITHIN A DESIGNATED FLOODWAY, FLOODPLAIN, OR SPECIAL FLOOD HAZARD AREA? YES ___ NO ___ IF YES, A FLOODPLAIN DEVELOPMENT PERMIT IS REQUIRED.

EXCAVATION SITE PLAN SKETCH

A sketch of the subject property, containing the following information, is required to be submitted with this application.

1. Sketch property boundaries with measurements (in linear feet) of all sides
2. Show all existing and proposed structures on the property
3. Indicate how access is achieved from the property to the public right of way
4. Show all easements, specials restrictions and existing underground infrastructure
5. Show pre and post construction drainage patterns
6. Indicate location of floodway and flood fringe
7. Indicate "NORTH" on the sketch

NOTICE

I HEREBY CERTIFY THAT I HAVE EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. THE GRANTING OF THIS PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY FEDERAL STATE OR LOCAL LAW REGULATING EXCAVATION.

Signature of Applicant / Agent

Date

Signature of Owner

Date

OFFICE USE ONLY BELOW THIS LINE

APPLICATION REVIEW

- Application Complete
- Fees Paid
- Check property for floodway, floodplain or SFHA status
- Submit to the Planning & Zoning Commission consideration
- Scan documents to address file

PLANNING & ZONING COMMISSION Meeting Date _____ Action _____

Notes: _____

Application Fee \$ _____ Date Paid _____ Cash/MO#/Check# _____ Receipt # _____