HARDSCAPE PERMIT APPLICATION
(DRIVEWAYS, SIDEWALKS, PATIOS, DECKS, ETC.)

PROPERTY CONTROL #: ____-____-____-____-____-____

PLEASE PRINT

JOBSITE ADDRESS

PROPERTY OWNER NAME

HOME PHONE (_____) ____________ CELL ______________________

PROPERTY OWNER ADDRESS

CONTRACTOR (COMPANY) NAME

CONTRACTOR (COMPANY) ADDRESS

CITY __________________ ST _______ ZIP ______________

BUS. PHONE (_____) ____________ CELL ______________________

FAX __________________ E-MAIL __________________________

NOTE: PERMIT EXPIRES IF WORK IS NOT STARTED WITHIN 180-DAYS OR IF ACTIVITY LAPSES FOR 180 DAYS. PLANS MUST BE ON THE JOB SITE FOR ALL INSPECTIONS. FINAL INSPECTION IS REQUIRED ON ALL PERMITS.

*ALL WORK TO BE ILLUSTRATED ON A SURVEY OR SITE PLAN, DRAWN TO SCALE.*

Check one:

____ RESIDENTIAL          ____ COMMERCIAL

Check one:

____ ASPHALT          ____ CONCRETE          ____ PAVERS

Check all that apply and indicate individual costs, as applicable:

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>DRIVEWAY*</td>
<td>$________</td>
</tr>
<tr>
<td>SIDEWALK</td>
<td>$______</td>
</tr>
<tr>
<td>DECK (POOL, ETC.)</td>
<td>$________</td>
</tr>
<tr>
<td>WALKWAY</td>
<td>$________</td>
</tr>
<tr>
<td>RE-STRIPING*</td>
<td>$________</td>
</tr>
<tr>
<td>NEW PARKING LOT*</td>
<td>$________</td>
</tr>
<tr>
<td>PATIO*</td>
<td>$________</td>
</tr>
<tr>
<td>OVERLAY</td>
<td>$________</td>
</tr>
<tr>
<td>SEALCOATING</td>
<td>$________</td>
</tr>
<tr>
<td>OTHER</td>
<td>$________</td>
</tr>
</tbody>
</table>

Description Of Work: ____________________________________________________________

______________________________________________________________________________

SIGNATURE OF QUALIFIER       CONTR. REGISTRATION #       WORKERS COMP#       EXEMPT (FID /FEIN) #

OR

PLEASE WRITE LEGIBLY AND COMPLETE FULLY. ILLEGIBLE OR INCOMPLETE NOTARIZATIONS WILL NOT BE ACCEPTED.

STATE OF __________________
COUNTY OF __________________

The foregoing instrument was acknowledged before me this _____ day of ___________, 20____ by ______________________________

Printed Name of Qualifier

Personally Known _____
OR
Produced Identification _____
Type of Identification Produced __________________

___________________________________________
Notary Signature (SEAL)

7/16