



Administration Department  
 (970) 984-2311  
 Fax: (970) 984-2716  
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Town of New Castle  
 PO Box 90  
 450 W. Main Street  
 New Castle, Co 81647

## GRADING PERMIT APPLICATION

(Authorization: New Castle Municipal Code 15.36.010 et seq.)

Applicant:	
Address:	Phone: Fax: Email:
Property Owner:	
Address:	Phone: Fax: Email:
Contact Person:	
Address:	Phone: Fax: Email:

Property Location/Address:	
Legal Description:	Acres:
Existing Zone (e.g. R-1, C-1):	Existing Land Use:

**CHECK APPLICABLE TYPE(S) OF LAND DISTURBANCE**

- |   |   |
|---|---|
| <input type="checkbox"/> Within one hundred (100) feet of a stream        | <input type="checkbox"/> Planned Unit Development |
| <input type="checkbox"/> Residential development over one-half (1/2) acre | <input type="checkbox"/> Commercial Development   |
| <input type="checkbox"/> Subdivision                                      | <input type="checkbox"/> Industrial Development   |

Applicant's Signature:	Date:
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For Town Use Only

Town Engineer Approval Date:	Initials:	Application Fee \$100.00
Bond Required: <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount of Bond:	Total Due:
Permit No:	Expiration Date:	
Extension Granted: <input type="checkbox"/> Yes <input type="checkbox"/> No	Extension Expires:	