



The Commonwealth of Massachusetts
Board of Building Regulations and Standards
Massachusetts State Building Code, 780 CMR



Building Permit Application To Construct, Repair, Renovate Or Demolish a
One- or Two-Family Dwelling

Revised
March 2011

This Section For Official Use Only

Building Permit Number: _____ Date Applied: _____

Building Official (Print Name) Signature Date

SECTION 1: SITE INFORMATION

1.1 Property Address: _____ 1.1a Is this an accepted street? yes _____ no _____	1.2 Assessors Map & Parcel Numbers _____ Map Number _____ Parcel Number _____
1.3 Zoning Information: _____ Zoning District _____ Proposed Use _____	1.4 Property Dimensions: _____ Lot Area (sq ft) _____ Frontage (ft) _____

1.5 Building Setbacks (ft)

Front Yard		Side Yards		Rear Yard	
Required	Provided	Required	Provided	Required	Provided

1.6 Water Supply: (M.G.L c. 40, §54) Public <input type="checkbox"/> Private <input type="checkbox"/>	1.7 Flood Zone Information: Zone: ____ Outside Flood Zone? Check if yes <input type="checkbox"/>	1.8 Sewage Disposal System: Municipal <input type="checkbox"/> On site disposal system <input type="checkbox"/>
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SECTION 2: PROPERTY OWNERSHIP¹

2.1 Owner¹ of Record:

Name (Print) _____ City, State, ZIP _____

No. and Street _____ Telephone _____ Email Address _____

SECTION 3: DESCRIPTION OF PROPOSED WORK² (check all that apply)

New Construction <input type="checkbox"/>	Existing Building <input type="checkbox"/>	Owner-Occupied <input type="checkbox"/>	Repairs(s) <input type="checkbox"/>	Alteration(s) <input type="checkbox"/>	Addition <input type="checkbox"/>
Demolition <input type="checkbox"/>	Accessory Bldg. <input type="checkbox"/>	Number of Units _____	Other <input type="checkbox"/> Specify: _____		

Brief Description of Proposed Work²: _____

SECTION 4: ESTIMATED CONSTRUCTION COSTS

Item	Estimated Costs: (Labor and Materials)	Official Use Only
1. Building	\$ _____	1. Building Permit Fee: \$ _____ Indicate how fee is determined: <input type="checkbox"/> Standard City/Town Application Fee <input type="checkbox"/> Total Project Cost ³ (Item 6) x multiplier _____ x _____ 2. Other Fees: \$ _____ List: _____ _____ Total All Fees: \$ _____ Check No. _____ Check Amount: _____ Cash Amount: _____ <input type="checkbox"/> Paid in Full <input type="checkbox"/> Outstanding Balance Due: _____
2. Electrical	\$ _____	
3. Plumbing	\$ _____	
4. Mechanical (HVAC)	\$ _____	
5. Mechanical (Fire Suppression)	\$ _____	
6. Total Project Cost:	\$ _____	

SECTION 5: CONSTRUCTION SERVICES

<p>5.1 Construction Supervisor License (CSL)</p> <p>_____</p> <p>Name of CSL Holder</p> <p>_____</p> <p>No. and Street</p> <p>_____</p> <p>City/Town, State, ZIP</p> <p>_____</p> <p>_____</p> <p>Telephone _____ Email address _____</p>	<p>_____</p> <p>License Number Expiration Date</p> <p>_____</p> <p>List CSL Type (see below) _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">Type</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td align="center">U</td> <td>Unrestricted (Buildings up to 35,000 cu. ft.)</td> </tr> <tr> <td align="center">R</td> <td>Restricted 1&2 Family Dwelling</td> </tr> <tr> <td align="center">M</td> <td>Masonry</td> </tr> <tr> <td align="center">RC</td> <td>Roofing Covering</td> </tr> <tr> <td align="center">WS</td> <td>Window and Siding</td> </tr> <tr> <td align="center">SF</td> <td>Solid Fuel Burning Appliances</td> </tr> <tr> <td align="center">I</td> <td>Insulation</td> </tr> <tr> <td align="center">D</td> <td>Demolition</td> </tr> </tbody> </table>	Type	Description	U	Unrestricted (Buildings up to 35,000 cu. ft.)	R	Restricted 1&2 Family Dwelling	M	Masonry	RC	Roofing Covering	WS	Window and Siding	SF	Solid Fuel Burning Appliances	I	Insulation	D	Demolition
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SF	Solid Fuel Burning Appliances																		
I	Insulation																		
D	Demolition																		

<p>5.2 Registered Home Improvement Contractor (HIC)</p> <p>_____</p> <p>HIC Company Name or HIC Registrant Name</p> <p>_____</p> <p>No. and Street</p> <p>_____</p> <p>City/Town, State, ZIP Telephone _____</p>	<p>_____</p> <p>HIC Registration Number Expiration Date</p> <p>_____</p> <p>_____</p> <p align="center">Email address</p>
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SECTION 6: WORKERS' COMPENSATION INSURANCE AFFIDAVIT (M.G.L. c. 152. § 25C(6))

Workers Compensation Insurance affidavit must be completed and submitted with this application. Failure to provide this affidavit will result in the denial of the Issuance of the building permit.

Signed Affidavit Attached? Yes No

SECTION 7a: OWNER AUTHORIZATION TO BE COMPLETED WHEN OWNER'S AGENT OR CONTRACTOR APPLIES FOR BUILDING PERMIT

I, as Owner of the subject property, hereby authorize _____
to act on my behalf, in all matters relative to work authorized by this building permit application.

Print Owner's Name (Electronic Signature) Date

SECTION 7b: OWNER¹ OR AUTHORIZED AGENT DECLARATION

By entering my name below, I hereby attest under the pains and penalties of perjury that all of the information contained in this application is true and accurate to the best of my knowledge and understanding.

Print Owner's or Authorized Agent's Name (Electronic Signature) Date

NOTES:

1. An Owner who obtains a building permit to do his/her own work, or an owner who hires an unregistered contractor (not registered in the Home Improvement Contractor (HIC) Program), will ***not*** have access to the arbitration program or guaranty fund under M.G.L. c. 142A. Other important information on the HIC Program can be found at www.mass.gov/oca Information on the Construction Supervisor License can be found at www.mass.gov/dps
2. When substantial work is planned, provide the information below:

Total floor area (sq. ft.) _____ (including garage, finished basement/attics, decks or porch)	Habitable room count _____
Gross living area (sq. ft.) _____	Number of bedrooms _____
Number of fireplaces _____	Number of half/baths _____
Number of bathrooms _____	Number of decks/ porches _____
Type of heating system _____	Enclosed _____ Open _____
Type of cooling system _____	
3. "Total Project Square Footage" may be substituted for "Total Project Cost"

Homeowner Warning Notice

IF YOU ARE APPLYING FOR A BUILDING PERMIT AS A HOMEOWNER

As a homeowner acting as your own contractor:

- You will be **personally responsible** for all work on this project.
- You are responsible to see that all work meets the Massachusetts State Building Code and the City Ordinances.
- You **must** supervise all work.
- You **must** call the Bldg. Dept. to **schedule all required building inspections.**
- You **must be present for all the building inspections.**
- You have **waived** all rights to the Massachusetts Guaranty Fund.
- You are the General Contractor of the project and a court of law will view you as such if you are sued, or if you should have the need to sue another party.
- Your subcontractors may lien your property.
- Any worker injured on your project may sue you if you or the company they work for does not carry Workers' Compensation Insurance.
- Failure to carry Workers' Compensation insurance may result in criminal penalties, i.e. fines and/or imprisonment. (Reference MGL c.152 § 25)

This warning has been assembled because we have found that a majority of those citizens who act as their own contractor are not aware of the responsibilities that go along with assuming the construction responsibilities. Your signature below verifies you have read this warning and understand its implications.

Signature _____ Date _____

For Office Use Only:

Permit No. _____ Date _____

BEVERLY, MASSACHUSETTS
Construction Supervisor License Exemption
Supplement to Permit Application

DATE SUBMITTED _____

JOB LOCATION _____

HOMEOWNER'S NAME _____

HOMEOWNER'S MAILING ADDRESS _____

HOME PHONE NO. _____ WORK PHONE _____

The licensing exemption for "homeowners" is intended to include owner-occupied one or two-family dwellings and to allow such homeowners to engage an individual for hire who does not possess a license, provided that the owner acts as supervisor.

STATE BUILDING CODE DEFINITION OF HOMEOWNER:

"Person(s) who owns a parcel of land on which he/she resides or intends to reside, on which there is, or is intended to be a one or two family dwelling, attached or detached structures accessory to such use and/or farm structures. A person who constructs more than one home in a two-year period shall not be considered a homeowner. Such "homeowner" shall submit to the Building Official, on a form acceptable to the Building Official, that he/she shall be responsible for all such work performed under the building permit."

The undersigned "homeowner" assumes responsibility for compliance with the State Building Code and other applicable codes, ordinances, rules and regulations.

The undersigned "homeowner" certifies that he/she understands the City of Beverly Municipal Inspections minimum inspection procedures and requirements and that he/she will comply with said procedures and requirements.

Homeowner's Signature _____ Date: _____

For Office Use Only:
Permit No.. _____ Date _____

BEVERLY, MASSACHUSETTS
Home Improvement Contractor Registration
Supplement to Permit Application

MGL 142A requires that the “reconstruction, alteration, renovation, repair, modernization, conversion, improvement, removal or demolition or the construction of an addition to any pre-existing owner-occupied building containing at least one, but not more than four dwelling units, which building or portion thereof is used or designed to be used as a residence or dwelling unit, or to structures which are adjacent to such residence or building” be done by registered contractors with certain exceptions.

TYPE OF WORK _____ EST. COST _____

ADDRESS OF WORK: _____

OWNER NAME: (PRINT) _____

DATE OF PERMIT APPLICATION: _____

I hereby certify that:

Registration is not required for the following reasons:

- ___ Work excluded by law
- ___ Job under \$1000.00
- ___ Building not owner-occupied
- ___ Owner pulling own permit
- ___ Other (Specify) _____

Notice is hereby given that:

Owners pulling their own permit or dealing with unregistered contractors for applicable home improvement work do not have access to the arbitration program or guaranty fund under MGL 142A.

Signed under penalties of perjury:

I hereby apply for a permit as the agent for the owner:

DATE CONTRACTOR’S SIGNATURE REGISTRATION #

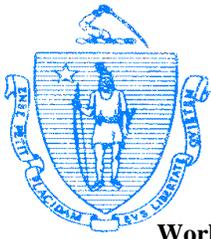
OR:

Notwithstanding the above notice I hereby apply for a permit as the owner of the above property:

DATE OWNER’S SIGNATURE

For Office Use Only:

Permit No.. _____ Date _____



The Commonwealth of Massachusetts
 Department of Industrial Accidents
 Office of Investigations
 600 Washington Street, 7th Floor
 Boston, Mass. 02111

Workers' Compensation Insurance Affidavit: Building/Plumbing/Electrical Contractors

Applicant information: Please PRINT legibly

name: _____

address: _____

city _____ state: _____ zip: _____ phone # _____

work site location (full address): _____

I am a homeowner performing all work myself. Project Type: New Construction Remodel
 I am a sole proprietor and have no one working in any capacity. Building Addition

I am an employer providing workers' compensation for my employees working on this job.

company name: _____

address: _____

city: _____ **phone #:** _____

insurance co. _____ **policy #** _____

I am a sole proprietor, **general contractor**, or **homeowner** (*circle one*) and have hired the contractors listed below who have the following workers' compensation policies:

company name: _____

address: _____

city: _____ **phone #:** _____

insurance co. _____ **policy #** _____

company name: _____

address: _____

city: _____ **phone #:** _____

insurance co. _____ **policy #** _____

Attach additional sheet if necessary

Failure to secure coverage as required under Section 25A of MGL 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one years' imprisonment as well as civil penalties in the form of a STOP WORK ORDER and a fine of \$100.00 a day against me. I understand that a copy of this statement may be forwarded to the Office of Investigations of the DIA for coverage verification.

I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.

Signature _____ Date _____

Print name _____ Phone # _____

official use only do not write in this area to be completed by city or town official

city or town: _____ permit/license # _____ Building Department

check if immediate response is required Licensing Board

Selectmen's Office

contact person: _____ phone #: _____ Health Department

Other _____

(revised Sept. 2003)

Information and Instructions

Massachusetts General Laws chapter 152 section 25 requires all employers to provide workers' compensation for their employees. As quoted from the "law", an *employee* is defined as every person in the service of another under any contract of hire, express or implied, oral or written.

An *employer* is defined as an individual, partnership, association, corporation or other legal entity, or any two or more of the foregoing engaged in a joint enterprise, and including the legal representatives of a deceased employer, or the receiver or trustee of an individual, partnership, association or other legal entity, employing employees. However the owner of a dwelling house having not more than three apartments and who resides therein, or the occupant of the dwelling house of another who employs persons to do maintenance, construction or repair work on such dwelling house or on the grounds or building appurtenant thereto shall not because of such employment be deemed to be an employer.

MGL chapter 152 section 25 also states that **every state or local licensing agency shall withhold the issuance or renewal of a license or permit to operate a business or to construct buildings in the commonwealth for any applicant who has not produced acceptable evidence of compliance with the insurance coverage required.** Additionally, neither the commonwealth nor any of its political subdivisions shall enter into any contract for the performance of public work until acceptable evidence of compliance with the insurance requirements of this chapter have been presented to the contracting authority.

Applicants

Please fill in the workers' compensation affidavit completely, by checking the box that applies to your situation. Please supply company name, address and phone numbers along with a certificate of insurance as all affidavits may be submitted to the Department of Industrial Accidents for confirmation of insurance coverage. **Also be sure to sign and date the affidavit.** The affidavit should be returned to the city or town that the application for the permit or license is being requested, **not** the Department of Industrial Accidents. Should you have any questions regarding the "law" or if you are required to obtain a workers' compensation policy, please call the Department at the number listed below.

City or Towns

Please be sure that the affidavit is complete and printed legibly. The Department has provided a space at the bottom of the affidavit for you to fill out in the event the Office of Investigations has to contact you regarding the applicant. Please be sure to fill in the permit/license number which will be used as a reference number. The affidavits may be returned to the Department by mail or FAX unless other arrangements have been made.

The Office of Investigations would like to thank you in advance for your cooperation and should you have any questions, please do not hesitate to give us a call.

The Department's address, telephone and fax number:

The Commonwealth Of Massachusetts
Department of Industrial Accidents
Office of Investigations
600 Washington Street, 7th Floor
Boston, Ma. 02111
fax #: (617) 727-7749
phone #: (617) 727-4900 ext. 406



BEVERLY MUNICIPAL INSPECTIONS
CONSTRUCTION DEBRIS DISPOSAL FORM

780 CMR 111.5 & 5111.5 Debris. As a condition of issuing a permit for the demolition, renovation, rehabilitation or other alteration of a building or structure, M.G.L. c. 40, § 54 requires that the debris resulting there from shall be disposed of in a properly licensed solid waste disposal facility as defined by M.G.L. c. 111, § 150A. Signature of the permit applicant, date and number of the building permit to be issued shall be indicated on a form provided by the building department, and attached to the office copy of the building permit retained by the building department. If the debris will not be disposed of as indicated, the holder of the permit shall notify the building official, in writing, as to the location where the debris will be disposed; also refer to DEP Regulations 310 CMR 7.09(2) and 310 CMR 7.15, when applicable.

In accordance with the provisions of MGL c 40, S 54, a condition of Building Permit Number _____ is that the debris resulting from this work shall be disposed of in a properly licensed solid waste disposal facility as defined by MGL c 111, S 150A. The debris will be disposed of in:

LOCATION OF FACILITY _____

CONSTRUCTION SITE ADDRESS _____

Signature of Applicant _____ Date _____

AFFIDAVIT

As a result of the provisions of MGL c 40, S 54, I acknowledge that as a condition of Building Permit Number _____ all debris resulting from the construction activity governed by this Building Permit shall be disposed of in a properly licensed solid waste disposal facility, as defined by MGL c 111, S 150A.

I certify that I will notify the Building Official by _____ (two months maximum) of the location of the solid waste disposal facility where the debris resulting from the said construction activity shall be disposed of, and I shall submit the appropriate form for attachment to the Building Permit.

Signature of Applicant _____ Date _____

(PRINT OR TYPE THE FOLLOWING INFORMATION)

Name of Permit Applicant _____

Firm Name, if any _____

**CITY OF BEVERLY
MINOR PROJECT APPLICATION
FOR PROJECTS DISTURBING LESS THAN ONE QUARTER ACRE**

Submittal Date of Application: _____

TO THE DIRECTOR OF ENGINEERING: The undersigned hereby applies for a permit to disturb less than one quarter acre of land in accordance with the following specifications:

I. LOCUS INFORMATION

Ward: _____ **Zoning District:** _____ **Assessors Map #:** _____ **Lot #:** _____
Street Address of Lot to be worked on: _____ **Lot Area:** _____

II. RESPONSIBLE PARTY INFORMATION

Owner's Name: _____ **Phone No.:** _____
Cell Phone No.: _____ **Fax No.:** _____
Owner's Mailing Address: _____

Contractor's Name: _____ **Phone No.:** _____
Cell Phone No.: _____ **Fax No.:** _____
License No.: _____
Contractor's Mailing Address: _____

III. PROJECT DESCRIPTION

Describe Work: _____

Anticipated amount of excavate to be removed from site: _____ cubic yards

Amount of excavate to be utilized on site: **Backfill:** _____ cubic yards **Grading:** _____ cubic yards
Other: _____ cubic yards

Where and how will excavate be stockpiled on site? _____

The undersigned acknowledge/s that any land clearing, construction, or development involving the movement of earth must be done in accordance with the City of Beverly's Erosion and Sediment Control and Materials Management Ordinance and any Plan approved by the Engineering Department under this Ordinance. Further, as the applicant representing the owner, I hereby certify that the proposed measures are authorized by the property owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all applicable laws of this jurisdiction.

Signature of Owner: _____ **Date:** _____
Signature of Applicant (if not owner): _____ **Date:** _____
Applicant's Business Address: _____ **Phone No.:** _____
Cell Phone Number: _____ **Fax No.:** _____

Accepted By: _____ **Date:** _____
Director of Engineering: _____ **Date:** _____

CITY OF BEVERLY
ABBREVIATED EROSION/SEDIMENT CONTROL & MATERIALS MANAGEMENT APPLICATION
FOR PROJECTS DISTURBING LESS THAN ONE ACRE BUT MORE THAN ONE QUARTER ACRE

Submittal Date of Application: _____

TO THE DIRECTOR OF ENGINEERING: The undersigned hereby applies for a permit to disturb less than one acre of land but more than one quarter acre of land in accordance with the following specifications:

I. LOCUS INFORMATION

Ward: _____ **Zoning District:** _____ **Assessors Map #:** _____ **Lot #:** _____
Street Address of Lot to be worked on: _____ **Lot Area:** _____

II. RESPONSIBLE PARTY INFORMATION

Owner's Name: _____ **Phone No.:** _____
Cell Phone No.: _____ **Fax No.:** _____
Owner's Mailing Address: _____

Contractor's Name: _____ **Phone No.:** _____
Cell Phone No.: _____ **Fax No.:** _____
License No.: _____
Contractor's Mailing Address: _____

III. PROJECT DESCRIPTION

Describe Work: _____

Anticipated amount of excavate: _____ cubic yards

Amount of excavate to be utilized on site: Backfill _____ cubic yards Grading _____ cubic yards
Other _____ cubic yards

Amount of excavate to be removed from site: _____ cubic yards

Where will excavate be stockpiled on site? _____

How will stockpiled material be protected from erosion?

- Ringed w/ staked hay bales and/or entrenched silt fence _____
- Covered w/ staked geotextile or similar fabric _____
- Seeded with quick growing grass during growing season _____
- Other _____

Describe the location of site entrance/exit and how public ways and associated drainage structures will be protected from soil and debris migrating off site by way of equipment traffic _____

Describe measures to be taken to protect adjacent properties from sedimentation and migration of trash, debris and other material _____

Describe measures to be taken to house any hazardous materials, and protocol for mitigating their release _____

The undersigned acknowledge/s that any land clearing, construction, or development involving the movement of earth must be done in accordance with the City of Beverly's Erosion and Sediment Control and Materials Management Ordinance and any Plan approved by the Engineering Department under this Ordinance. Further, as the applicant representing the owner, I hereby certify that the proposed measures are authorized by the property owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all applicable laws of this jurisdiction.

Signature of Owner: _____ **Date:** _____

Signature of Applicant (if not owner): _____ **Date:** _____

Applicant's Business Address: _____ **Phone No.:** _____

Cell Phone Number: _____ **Fax No.:** _____

Accepted By: _____ **Date:** _____

Engineering Dept.: _____ **Date:** _____

**CITY OF BEVERLY
EROSION/SEDIMENT CONTROL & MATERIALS MANAGEMENT APPLICATION**

Submittal Date of Application _____

TO THE DIRECTOR OF ENGINEERING: The undersigned hereby applies for a permit to disturb one acre or more of land in accordance with the following specifications:

1. Locus Information

Ward:		Zoning District		Assessor Map		Assessor Lot	
Street Address				Lot Area			

2. Responsible Party Information

Owner Information

Name		Phone No.	
Address		Fax No.	
		Cell Phone No.	

Licensed Professional Engineer Information

Name		Phone No.	
Address		Fax No.	
		Cell Phone No.	
		Mass. License No.	

Contractor Information

Name		Phone No.	
Address		Fax No.	
		Cell Phone No.	
		License No.	

3. Site Description

Describe the Nature and Purpose of the Project, the overall site, and adjacent properties:

Describe Types of Soil Disturbing Activities:

Runoff Coefficient:	
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Site Area:	
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Sequence of Major Activities(in order of occurrence)

Order	Description of Activity	Estimated Date of Commencement of Work	Estimated Completion Date
	Installation of temporary erosion/sediment control measures		
	Stripping and clearing		
	Rough grading		
	Construction of utilities		
	Construction of other infrastructure		
	Construction of buildings		
	Final grading and landscaping		
	Other (specify)		
	Other (specify)		

Description of Receiving Waters

4. Controls—Erosion & Sediment

Details and Specifications on Proposed Stabilization Practices (Erosion Controls)

Structural Practices (Sediment Controls)

A large, empty rectangular box with a thin black border, intended for describing structural practices related to sediment control.

Storm Water Management (Waterway/water course protection)

A large, empty rectangular box with a thin black border, intended for describing storm water management practices for waterway and water course protection.

Offsite Vehicle Tracking (Construction site access)

5. Materials Management Practices

Materials Storage, application and disposal (Pesticides/Chemicals)

Hazardous Materials—Storage, use and disposal (Petroleum Products)

Sanitary Waste

Other Materials (Washout concrete/excess pavement etc)

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6. Inspection

The Permittee shall notify the City of Beverly Engineering Department at least two working days before the following:

A	Start of construction
B	Installation of sediment and erosion control
C	Completion of site clearing
D	Completion of rough grading
E	Completion of final grading
F	Close of construction season
G	Completion of final landscaping
H	Removal of sediment and erosion control measures

The undersigned acknowledge/s that any land clearing, construction, or development involving the movement of earth must be done in accordance with the City of Beverly’s Erosion and Sediment Control and Materials Management Ordinance and any Plan approved by the Engineering Department under this Ordinance. Further, as the applicant representing the owner, I hereby certify that the proposed measures are authorized by the property owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all applicable laws of this jurisdiction. I further certify that a legal notice in a newspaper of general circulation will be advertised and abutters notified by regular mail within 3 days of submission of this application.

Signature of Applicant _____ Address _____ Date _____

Signature of Owner		Date:	
Signature of Applicant(if not owner)		Date:	
Applicant’s Business Address		Phone No.:	
		Fax No.:	
		Cell Phone No.:	

Accepted by		Date:	
Engineering Dept.		Date:	
Permit Fee:---\$200.00	Check No.:	Date:	
Bond/LC Amount		Date:	

Required Attachments:

- Natural resources map (Section 20-170.1.a.)
- Identification of sensitive or potentially problematic areas or characteristics on and adjacent to the site (Section 20-170.1.c.)
- Site development plan depicting the proposed project improvements, existing and proposed grades, and all erosion control measures (Section 20-170.1.d.)
- Vegetation/revegetation/landscaping plan (Section 20-170.1.g.)
- An operation and maintenance plan (Section 29-170.1.h.)
- Supporting calculations