	Fax: (319) 356-6084	Permit #:
Job Site Address	Parcel Number	
Lot Number & Subdivision Name		
Name of Owner	Name of Applicant (if di <u>f</u>	fferent)
Applicant Street Address (including C	ity, State, Zip)	
Applicant Phone	Applicant Email	
Project Description		
	comply with all County ordinances, State ar rtifies under oath and penalties of perjury t	
Applicant's Signature	Date	
after receipt of permit fee is acknowle	proceed in accordance with the information edged. This permit shall expire 24 months a s permit shall be contained on the site or th	fter the approval date below.

**<u>Initial each item below</u>** to confirm that you are aware of the following requirements.

A Sensitive Areas Report at time of application.

An Erosion and Sediment Control plan at time of application.

A permit application fee of \$500 at time of approval.