CITY OF SHREVEPORT
DEPARTMENT OF OPERATIONAL SERVICES

LAND ALTERING ACTIVITY PERMIT

APPLICANT TO COMPLETE SECTIONS I, II, III AND IV.

I. GENERAL INFORMATION:

LEGAL DESCRIPTION OF PROPERTY: _____

_____

PROPERTY ADDRESS: _____

OWNER/APPLICANT: _____

ADDRESS OF APPLICANT: _____

PHONE NO. OF APPLICANT: _____ FAX NO. OF APPLICANT: _____

II. DESCRIPTION OF USE OF PROPERTY UPON COMPLETION OF CONSTRUCTION:

Examples: residential subdivision; industrial (describe); commercial (describe); etc.

_____

_____

Note: For all commercial, industrial or businesses uses, the following information is to be attached to this application if the site is within the Cross Lake Watershed:

(1) A list of all chemicals, fuels, oils, solvents, wastewater, or any other potentially hazardous or harmful substances which may be stored, transported or otherwise located at the site.

(2) For each such substance, a plan for preventing the possibility of discharge or spills into Cross Lake or any of its tributaries.

III. DESCRIPTION OF LAND ALTERING ACTIVITIES:

(1) GENERAL DESCRIPTION
Example: Clearing and grading of 40 acre tract and construction of roads and sidewalks

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_____

(2) ADDITIONAL INFORMATION:

Attach the following to this application:

(1) A map showing the location and dimensions of the site in question.

(2) A grading and drainage plan containing the following information:

a. The date, scale, north arrow and existing property lines on which the land altering activity is to take place.
b. The location, type of use, and total percentage of proposed and existing improvements on the site.
c. Existing and proposed topographic features.
d. Location of all temporary and permanent runoff detention basins, along with any constructed and/or altered drainage systems.

(3) An erosion control plan showing both temporary and permanent erosion controls.

(4) A sequence of scheduled activities.

(5) The 100-year floodplains and/or floodways with related elevations.

(6) A detailed street drainage layout.

IV. CERTIFICATION

I hereby certify that the information submitted with this application is true and complete. I agree to comply with the terms of the permit issued pursuant to this application, including all applicable provisions of the City of Shreveport's Code of Ordinances.

APPLICANT'S SIGNATURE: _____ DATE:

TO BE COMPLETED BY CITY:

Circle one:

Permit granted Permit denied

Date:_____ By:_____ Title:_____

Conditions of permit, if granted: _____

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