

Application for Contour Change Permit ALTON PUBLIC WORKS

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E-mail: <u>publicworks@cityofaltonil.gov</u> Website: <u>www.cityofaltonil.gov</u>

Applicant Name:						
Address:						
Phone:						
Location of Work:						
Type of Work:						
	☐ Excavating		Grading/Regrading	Bermi	ng/Diking	
Description of Wor	<u>k:</u>					
Drainage plan	Yes	No 🗌				
Finished contour plan	Yes	No 🗌				
Other:						
Type of Guarantee (suret	y bond, letter of cree	lit, cash	escrow):			
Signature of Applicant			_	Data		
Signature of Applicant				Date		
			_			
Public Works Director				Date		