



Town of Guilderland Stormwater Management  
PO Box 339, 5209 Western Turnpike, Altamont, NY 12009  
Phone: (518) 356-1980 ext. 1072; Fax: (518) 356-1990  
<https://www.townofguilderland.org/stormwater-management>

## **GRADING AND LOGGING PERMIT APPLICATION**

This form must be completed and filed with the Stormwater Management Official and required under the Stormwater Management Law for the town, LAW 241-21 (DEFINITIONS). All erosion and sediment control practices and measures shall be constructed, applied, and maintained in accordance with the sediment control plan and the "New York Standards and Specifications for Erosion and Sediment Control."

**SITE ADDRESS:** \_\_\_\_\_

**TAX MAP PARCEL NO:** \_\_\_\_\_

**APPLICANT NAME:** \_\_\_\_\_

**APPLICANT ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_

**ZIP CODE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**NAME OF PRESENT PROPERTY OWNER:** \_\_\_\_\_

**PROPERTY OWNERS ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_

**ZIP CODE:** \_\_\_\_\_

**APPLICANT IS:** ( ) OWNER ( ) DEVELOPER ( ) CONTRACTOR ( ) OTHER: \_\_\_\_\_

**WORK DESCRIPTION:** \_\_\_\_\_

\_\_\_\_\_

**STATE EROSION CONTROLS/STABILIZATION MEASURES DURING AND AFTER COMPLETION OF WORK. I.E.SILTFENCE,**

**RIP RAP, SEEDING, ETC.** \_\_\_\_\_

\_\_\_\_\_

**PRINT NAME:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**SMO SIGNATURE:** \_\_\_\_\_