CITY OF SCAPPOOSE
FILL/GRADING PERMIT APPLICATION
INSTRUCTIONS

- An on-site inspection shall be made by the appropriate city staff.
- The location, slope and amount of CUT/FILL will determine if the following will be required;
  - Plans- 3 copies; 1 of the 3 must not be larger than 11x17(our copy)
  - Specifications accompanied by a soils engineering report
  - Engineering geology report
  - DEQ 1200C Permit

All applications for a grading permit in the flood plain, flood fringe or flood way shall proceed through the Scappoose Planning Department.

NOTICE:
A SENSITIVE LANDS PERMIT & SEPARATE STATE PERMIT MAY BE REQUIRED FOR CUT/FILL IN OR NEAR WETLANDS OR WATERWAYS.

FOR FURTHER INFO, PLEASE CONTACT THE CITY ENGINEER @ (503) 543-7184

All contractors & subcontractors working within the City of Scappoose jurisdiction must obtain a CITY OF SCAPPOOSE BUSINESS LICENSE, prior to work commencement. Portland Metro does NOT cover Scappoose. Applications can be picked up/paid at City Hall or go to; https://www.ci.scappoose.or.us/cityhall/page/outside-city-limits-business-license-application

ALL CONTRACTORS & SUBS MUST ALSO HAVE A VALID STATE OF OREGON CONTRACTORS LICENSE.

Failure to immediately notify the CITY of any changes of subcontractors and/or suppliers will result in the withholding of the occupancy permit and penalties under state and local statutes.

CONSTRUCTION WORK HOURS FOR CONTRACTORS (per SMC 9.12.040)

MONDAY - FRIDAY 7:00 AM - 7:00 PM
SATURDAY 9:00 AM - 4:00 PM
SUNDAY & HOLIDAYS NO WORK ALLOWED

<table>
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<tr>
<th>Cubic yards</th>
<th>Base Fee</th>
<th>Add'l</th>
<th>Permit cost</th>
</tr>
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<td>$100</td>
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<tr>
<td>15,001 and above</td>
<td>$40.00 for each additional 1,000 CY</td>
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2019-2020 City of Scappoose Grading Permit page 1 of 3
CITY OF SCAPPOOSE
FILL/GRADING PERMIT APPLICATION

PERMIT NUMBER: ___________________________  APPLICATION DATE: ____________
PERMIT FEE: ___________________________  RECEIPT #: ___________________________

(See fee schedule below)

DATE ISSUED: ___________________________
Fill Permit is void 90 days from approval date unless renewal request is approved by City.

SITE ADDRESS: __________________________________________
SITE TAX LOT #(s): __________________________________________

*NAME OF APPLICANT: __________________________________________
Applicants Address: __________________________________________
Phone #: ___________________________  Email: ___________________________

*NAME OF PROPERTY OWNER: __________________________________________
Owners Address: __________________________________________
Phone #: ___________________________  Email: ___________________________

*NAME OF GENERAL SITE CONTRACTOR: __________________________
Contractor’s Address: __________________________________________
Phone #: ___________________________  Email: ___________________________
Contractors State CCB#: __________________________  City of Scappoose Business License #: __________________________

Amount of Fill: ___________ C.Y.  Material Source: __________________________________________
Proposed Start Date: ___________  Proposed Ending Date: ___________

GRADING ACTIVITY FOR WHICH THE PERMIT IS ISSUED (describe the present condition of the site, the type of fill intended, source of fill or disposal point for excavated material, compaction equipment proposed):
________________________________________
________________________________________

IS THIS INTENDED TO BE AN ENGINEERED FILL (will structures be constructed on the fill)?
YES_____ NO _____

IF YES, WHAT COMPACTION IS SPECIFIED? _____% T90 _____% T 180, other_________
PERMIT FEE IS BASED ON CUBIC YARDS (Cut/Fill);
0-50 Cubic Yards (CY) = $100.00
51-10,000 Cubic Yards = $100 plus $50 for each additional 1,000 CY ABOVE 50 CY
10,001 – higher CY = $650.00 plus $40 for each addition 1,000 CY ABOVE 10,001 CY

SPECIAL APPROVAL CONDITIONS:

ENGINEERED PLANS REQUIRED: ____ YES ____ NO

SKETCH REQUIRED: ____ YES ____ NO

__ LOCATES (PHONE 1-800-332-2344)
__ NOTIFY CITY ENGINEER BEFORE BEGINNING
__ INSPECTION REQUIRED – 503-543-7184
__ INSURANCE REQUIRED
__ BOND REQUIRED
__ COUNTY PERMIT ATTACHED & FEES PAID

ADDITIONAL CONDITIONS: ______________________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

This permit is issued by the City of Scappoose and subject to the terms and provisions contained herein and attached hereto and is accepted and approved by applicant subject to said terms and provisions.

LOCATES (48 HOUR NOTICE PRIOR TO EXCAVATION)

Oregon law requires you to follow the rules adopted by the Oregon Utility Notification Center. Those rules are set forth in OAR 952-001-0010 through 952-001-0090. You may obtain the rules or more information at; www.callbeforeyoudig.org

UTILITY NOTIFICATION CENTER 1-800-332-2344

This permit is valid for 90 days from the date of issue. Permit valid until: _____________

Please submit renewal requests to the City Engineer for approval, prior to expiration date.

SIGNATURE OF APPLICANT DATE SIGNATURE OF CITY ENGINEER DATE