



CITY OF COLTON – GRADING PERMIT APPLICATION

Owner Name: _____

Address: _____

Phone: _____ Email: _____

Site Address: _____

Legal Description: _____

Contractor Name: _____

Estimated Cubic Yards: _____

Total Area Disturbed (sq ft): _____

Will drainage patterns change? Yes / No

Erosion Control Measures: _____

Proposed Start Date: _____ Completion Date: _____

Applicant Signature: _____ Date: _____