

# MCPC

## MONONGALIA COUNTY PLANNING COMMISSION

243 High Street, Rm 026, Morgantown, WV 26505

Phone 304.291.9570 Fax 304.291.9573 www.monongaliacounty.gov

### Office Use

Permit No.: \_\_\_\_\_  
Zoning ID: \_\_\_\_\_  
Zoning Name: \_\_\_\_\_  
Tax District: \_\_\_\_\_  
Map No.: \_\_\_\_\_  
Fee: \_\_\_\_\_

## GENERAL APPLICATION FOR FILL/GRUBBING/GRADING

Application Fee: \$10.00

This application shall be used for all fill, grubbing and grading reviews of simple plans.

Specific requirements and specifications may be found in Section(s) 2550.05 and 2650.01 of the Zoning Ordinance.

**Date of Submittal** \_\_\_\_/\_\_\_\_/\_\_\_\_

### Property Owner:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Mailing Address (Street, City, State, Zip Code)

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
Email Address

### Agent (if applicable):

\_\_\_\_\_  
Name

\_\_\_\_\_  
Mailing Address (Street, City, State, Zip Code)

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
Email Address

### Legal Description of Property:

(You can use either the Street Address or the District, Map and Parcel No.)

\_\_\_\_\_  
Tax District                      Tax Map                      Parcel No.                      Parcel Size (acres or sq. ft.)

\_\_\_\_\_  
Street Address (Street, City, State, Zip Code)

### Scope of Work: (Please include the amount of area to be disturbed)

\_\_\_\_\_  
\_\_\_\_\_

I certify that I am familiar with the information contained in this application, and that to the best of my knowledge such information is true, complete and accurate. I understand that applying for Fill/Grubbing/Grading does not guarantee approval and that the fee associated with the application is non-refundable. I give permission for on-site visits as required.

**I understand that my presence is mandatory at any meetings regarding this application.**

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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243 High Street, Rm 110, Morgantown, WV 26505  
Phone 304.291.9570 Fax 304.291.9573 www.moncpc.org

### Office Use

Permit No.: \_\_\_\_\_  
Zoning ID: \_\_\_\_\_  
Zoning Name: \_\_\_\_\_  
Tax District: \_\_\_\_\_  
Map No.: \_\_\_\_\_  
Fee: \_\_\_\_\_

<b>Zoning Information:</b>	Has any site preparation (fill, grubbing or grading) begun on the property at the time of this application?	Y	N
	Is there existing structure(s)/use(s) on the parcel? If yes, what is the use of such structures? (Please Describe)	Y	N
	Will the construction, excavation or grading disturb more than 1 acre of surface?	Y	N
	Have you prepared a grading/grubbing plan?	Y	N
	Have you prepared a stormwater management plan?	Y	N
	Have you prepared an erosion and sediment control plan?	Y	N
	Is the parcel located in a Special Flood Hazard Area (SFHA)?	Y	N

### FILL, GRUBBING AND/OR GRADING SITE PLAN REVIEW:

An application for fill, grubbing or grading a property **Must** be accompanied by a site plan drawn to scale (1"=20' preferred), which includes the following:

1. The actual dimensions, size, square footage, and shape of the lot to be filled, grubbed or graded built upon;
2. The exact sizes and locations on the lot of existing structures, if any;
3. Grading/Grubbing plan;
4. Stormwater management plan (if more than 1 acre disturbed);
5. Erosion and sediment control plan (if more than 1 acre disturbed); and,

These requirements apply to the zoned planning districts in Monongalia County. No site plan shall be accepted unless it is complete and is verified as to the correctness of information given by the signature of the applicant attesting thereto.

Approval of site plans shall expire two years from the date of approval. In the event construction authorized by a zoning permit has not been completed within two (2) years, the permit shall become null and void.

The Planning Office shall make every reasonable effort to process an application within 30 working days once the application is deemed to be complete.