

Permit # _____
Date: _____
Fee Paid: _____
Fee: \$100.00

APPLICATION

ROCK CRUSHING PERMIT

Name of Applicant:	
Address:	
Phone #:	
Site Description (legal):	
Start Date:	Completion Date:
Method of Screening:	
Hours of Operation:	
Dust and Noise Control:	
Location to Nearest Resident:	
Property Zoning:	
Location and Heights of Stockpiles:	
Water Supply:	
Drainage Access:	
Insurance Compliance:	

***Provide Site Sketch on back or a separate sheet and Plans of Operation per Chapter 10, Article IX, Section 10-231(4) of the Village of Little Chute Municipal Code**

Signature of Applicant

Date of Application

Village Clerk

Date of Approval by Village Board

Date Sent to Public Works Department: _____

Applicants should refer to Chapter 10, Article IX, Sections 10-225 to Section 10-231 of the Little Chute Municipal Code to review all Village requirements.