City of Newport
200 S. Washington Ave.
Newport, WA 99156
Phone: (509) 447-5611
Accounting@newport-wa.org

CLEARING AND GRADING PERMIT APPLICATION
Permit #:_____

Property Owner			
Name:			
Address:			
City:	**State:**	**Zip:**	
Phone:		**Email:**	

Contractor:			
Company:		**Contact:**	
Mailing Address:		**Phone:**	
		Email:	
City:	**State:** **Zip:**	**UBI #:**	
State of Washington Business License:			
City of Newport Endorsement (required): ☐ **Yes**			

PROJECT INFORMATION:

Job Site Address (if different than above): _____

Description of Work: _____

_____

_____

☐ Site Plan Attached

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified or implied herein or not.

_____ _____ _____ _____

Signature of Property Owner | Date | Signature of Contractor | Date

FOR DEPARTMENT USE ONLY

Clearing and Grading Permit Fee: $25.00 Received by: _____Date:_____

Approved by: _____

Signature of Public Works Director