

Shoshone County Site Disturbance App/Permit

700 Bank Street, Wallace, Idaho 83873

Phone (208) 752-8891 • pz@co.shoshone.id.us

PERMIT #: _____

FOR OFFICIAL USE ONLY

Property owner name	Phone Email	Parcel number
Site location (address and city or directions)		

Contractor/Designer	E-mail	Phone	State Contractor #
Address			

REQUIRED PROJECT INFORMATION

Yards to be disturbed:	Estimated Slope %	Max. Excavating Depth:	Est. Timeline of Project: _____ to _____
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Applicant or Authorized Signature	Date
Applicant's Name (printed)	

I HEREBY ACKNOWLEDGE THAT THE ATTACHED SITE PLAN IS A TRUE AND ACCURATE REPRESENTATION OF THE SITE. I ATTEST THAT THE BUILDING PERIMETER AND PROPERTY LINES WILL BE CLEARLY MARKED AT THE TIME OF THE FIRST INSPECTION. I ASSUME ALL RESPONSIBILITY FOR ANY INACCURACIES CONTAINED HEREIN. I HAVE ALSO CAREFULLY READ AND COMPLETED THIS APPLICATION AND ACKNOWLEDGE THAT THE SAME IS TRUE AND CORRECT.

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Floodplain/way?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Zone:	Site plan required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Risk:	% of Slope:	Vegetation:	Soil type:	
Comments:				
Related Permits: _____				
Approved for Issuance by _____ Date _____				

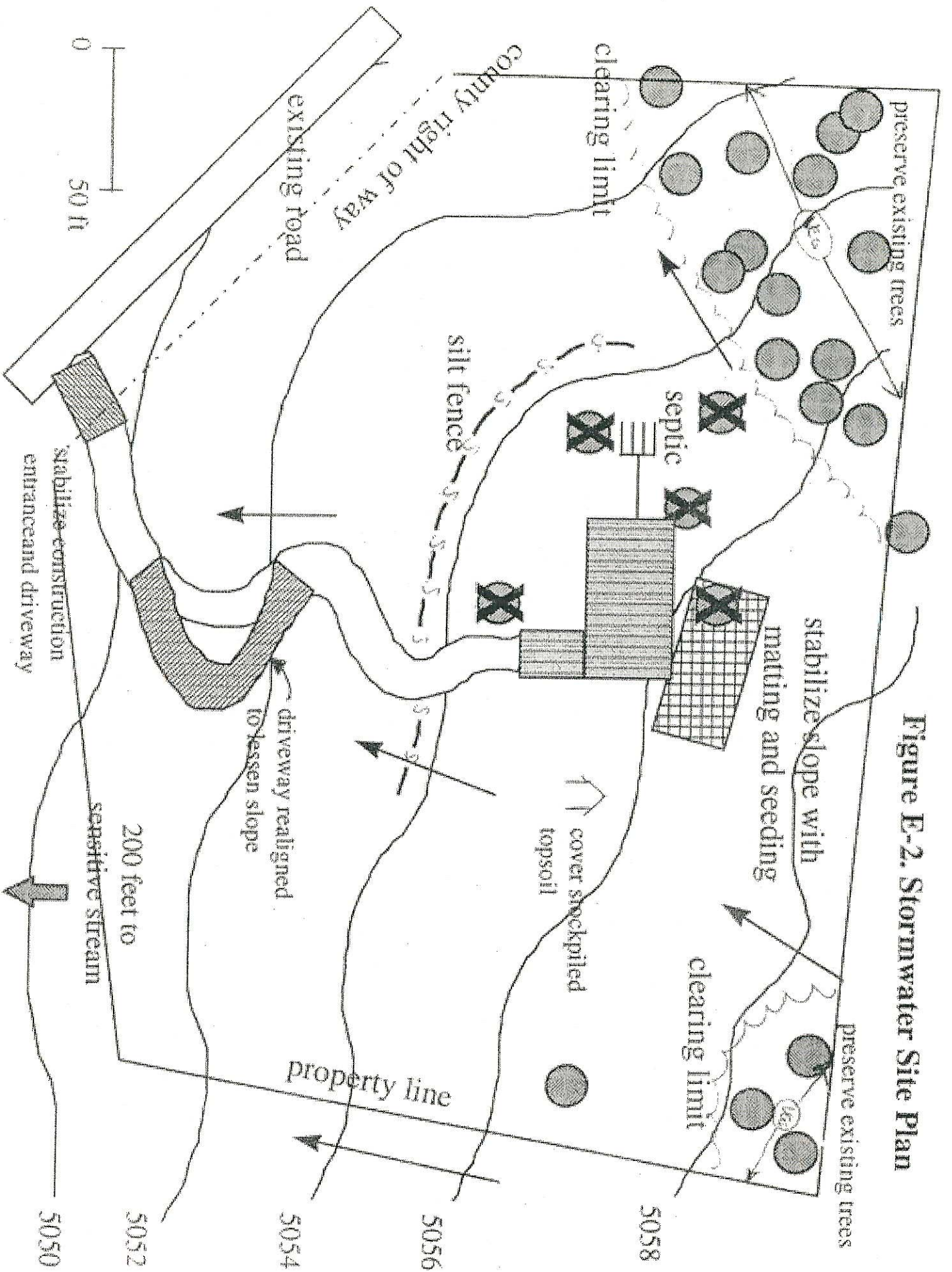


Figure E-2. Stormwater Site Plan