

Mining Permit

Extraction of earth material

Applications Due: 4th Wednesday of every month

4350 Peppermill Road

P.O. Box 86

Attica, MI 48412

atticatownship.org



Operator: _____ Operator Address: _____

Phone: _____ Email: _____

Owner: _____ Owner Address: _____

Phone: _____ Email: _____

Property ID (Parcel #): _____ Property Address: _____

Name of Operation: _____

Description of Request: _____

Type of Mining: Topsoil Clay Sand Gravel Rock Aggregates

Complete Site Plan: Digital & Hard Copies: 3 - 36 by 24 & 8 - 11 by 17

I do hereby swear that all statements, signatures, descriptions and exhibits submitted on or with this application are true and accurate to the best of my knowledge and that I am authorized to file and act on behalf of all owners of the subject property.

Applicant Signature: _____ Date: _____

Are you the Legal Ownership of Subject Property? Yes No

If no, have the property owner fill out and sign this portion of the application.

Name: _____ Signature: _____ Date: _____

By signing this application, I consent to Township Officials coming onto the subject property to evaluate this application.

Official Use Only

Received By: _____ Received Date: _____ Case #: _____ Fee Paid: _____

Planning Commission Public Hearing: _____

Township Board Final Decision Date: _____ Approved Approved with Conditions Denied

Conditions/Notes: _____