



TOWN OF  
**Ogden**  
 COUNTY OF MONROE  
 STATE OF NEW YORK

## Application for Fill Permit

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Property Location: \_\_\_\_\_

Description of area to be filled: (acreage, yards of fill) (Site map needed showing area)

Type of fill \_\_\_\_\_

Where fill is coming from \_\_\_\_\_

Estimated time to: Start: \_\_\_\_\_

Complete: \_\_\_\_\_

Fee: \$50.00 per acre

\_\_\_\_\_  
 Applicant's Signature