



## TOWN OF SHIRLEY

### APPLICATION FOR REMOVAL PERMIT FOR SOIL, LOAM, SAND, GRAVEL OR OTHER EARTH PRODUCTS

1. Person or legal entity to whom permit will be issued. \_\_\_\_\_  
\_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_
2. Person or legal entity (contractor) that will remove the gravel: \_\_\_\_\_  
\_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_
3. Person or legal entity who is the general contractor? \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_
4. Assessors Map/ Block/ Parcel # where removal operations will occur: \_\_\_\_\_
5. Who is the legal owner or owners of the property involved in the removal operations?  
(If different from applicant, attach letter of approval).  
\_\_\_\_\_
6. When would removal operations begin? \_\_\_\_\_
7. What is the expected duration of removal operations? \_\_\_\_\_
8. How many cubic yards will be removed? \_\_\_\_\_
9. How many truckloads will be removed? \_\_\_\_\_
10. What type of trucks will be used in the removal operation? \_\_\_\_\_
11. What are the anticipated hours of the removal operations? \_\_\_\_\_
12. What are the access roads that will be used to and from the removal site? \_\_\_\_\_  
\_\_\_\_\_
13. Has a permit ever been issued regarding this site? \_\_\_\_\_  
If yes, when? \_\_\_\_\_
14. What is the approximate land area involved in the removal operations? \_\_\_\_\_

15. How many cubic yards have been removed this past year? \_\_\_\_\_
16. What are the other roads or private ways that bound the removal area? \_\_\_\_\_  
\_\_\_\_\_
17. Please state the names and addresses of the people whom you believe to be the abutters to the removal area. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE: *If applying for Earth Removal Permit for the first time, you must present to the Board of Assessors an Abutters List which needs to be certified by that Board and attach it to this application - required prior to advertisement of Public Hearing.***

18. Will any resurfacing or regrading of the area will be necessary after removal operations are completed. \_\_\_\_\_
19. Will the wetlands or water table will be affected by the removal operations. \_\_\_\_\_  
\_\_\_\_\_
20. Is a plot plan, tape survey, or engineered plan available of the land involved in the removal operations? \_\_\_\_\_  
If so, please attach a copy of each.

**OTHERWISE:**

21. Attach a sketch of the land involved in the removal operations showing any access road, public or private ways that bound said land area.
22. Purposes for which permit for removal operations is sought. \_\_\_\_\_  
\_\_\_\_\_
23. Monetary value of the soil, loam, sand, gravel or other earth products that are to be removed from the land. \_\_\_\_\_
24. What other Town Departments will you be obtaining permits/approvals from in connection with this property (please list): \_\_\_\_\_
25. Attach all copies of approvals/permits you have already received from all other Departments (Board of Health, Conservation Commission, Planning Board, Building Inspectors or others that may be applicable).
26. Pursuant to M.G.L. Chapter 62C, §59A, I certify under the penalties of perjury that my best knowledge and belief, I/we have filled all state tax returns and paid all state taxes required under law.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Title (if signing for a business or trust) \_\_\_\_\_