



Development Services Application

6800 Main Street Phone 972-625-1106 Fax 972-624-2321

Please check the appropriate box below to indicate the type of permit/license you are requesting.

- New _____ Renewal – Previous Permit # _____
 Mowing & Underbrushing Zone (MUZ) Irrigation line (provide copy of DWU permit)
 Narrow Shoreline Variance Area (NSVA) Combined NSVA / Irrigation line (w/ DWU permit)
 Habitat Management Zone (HMZ)
 OTHER (Describe) _____

SITE INFORMATION:

Site Address (Location): _____ Parcel(s) Tax ID# _____

PROPERTY OWNER/APPLICANT INFORMATION:

Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

Alternate Contact _____

Phone _____ E-mail _____

DESCRIPTION:

I, _____, have completed the requirements identified in **Section 7.0 of the Elm Fork Project Mowing and Underbrushing Permit/License Guidelines** for issuance of the permit/license type as identified above. Contact information, location and description are also identified on the attached documentation as follows:

- a) Location map with approximate square footage of requested area.
- b) Habitat prescription plan (Required for a HMZ)

CONDITIONS:

- a) The Applicant agrees to abide by rules and requirements established by the Corps of Engineers mowing/underbrushing permit and by the plan developed and approved by the Corps of Engineers.
- b) The City of The Colony will have responsibility for enforcing the mowing/underbrushing permit requirements and agrees that if the Applicant is unable to maintain compliance with the Corps of Engineers requirements, the City may revoke the permit/license. In this event, the applicant shall cease all activities such as mowing/underbrushing on Corps property immediately.
- c) The Applicant shall adhere to the conditions and guidelines identified in the *Elm Fork Project Mowing and Underbrushing Permit/License Guidelines, dated June 2006*, and all referenced documentation in the guidelines for the term of this permit/license.
- d) Review of, and agree to adhere to Lewisville Lake Shoreline Management Policy
- e) Fees have been paid.

SIGNATURE of property owner or applicant _____

(Letter of authorization required if signature is other than property owner)

Print or Type Name: _____

Office Use Only	
<input type="checkbox"/> Site Plan Attached	Permit #: _____
Mitigation Cost Analysis – Vegetation/Habitat Condition _____	Total Paid: _____
Square footage of affected area _____	Payment Method: _____
Mitigation Fees (if applicable) _____	Receipt #: _____
Permit Amount _____	Fee credit: _____
Total Fees _____	Submitted: _____
	Accepted By: _____