

## The City of Ozark , Missouri

Department of Public Works

## Request for Termination of a Land Disturbance Permit & Application for Release of Securities

Land Disturbance Permit Number	r: Date:	mm/dd/yyyy	
Project Name:			
Property Location:			
Total Acreage of Site;	Total Acres Disturbed	l:	
Recorded Property Owner		Address:	
City	State	Zip	
Phone# F	ax#		
Reason for Termination Requ	est: (Check One):		
,		or other means. No further land disturbance activities a equipment has been removed from the site.	re
I hereby certify that I am familiar with the	e information contained in the termina	ation request and that to the best of my knowledge and belief such owner of the property for which this action is requested or his/her	
Print Name	Signature	Date, mm/dd/yyyy	
Information for Refund of Secur	ities:		
Name for refund check;Address for refund check;	Curren	nt Phone #:	
Approved:			
Environmental Resources Dept.	Date, mm/dd/yyyy		

Submittal of this application does not imply that a release of securities has been or will be authorized and issued. Should it be determined during the final inspection that the agreed upon work is incomplete, then this application will not be approved.

Environmental Resources Department. P.O. Box 295 Ozark, Missouri 65721 www.ozarkmissouri.com