



LANDSCAPE PERMIT
TOWN OF INDIAN BEACH
1400 SALTER PATH ROAD
PHONE # 252-247-3344
FAX #252-247-0513
[Email: admin@indianbeach.org](mailto:admin@indianbeach.org)

DATE: _____

OWNER: _____

INDIAN BEACH ADDRESS: _____

INDIAN BEACH FLOOD PLAIN ZONE: _____

MAILING ADDRESS: _____

PHONE#: _____

EMAIL ADDRESS: _____

TYPE OF WORK: _____

NAME OF CONTRACTOR: _____

BUSINESS NAME AND ADDRESS: _____

NC License # _____

Failure to comply with the requirements of this article shall upon issuance of any building permit for additional development, the owner of said property must agree with the Town of Indian Beach in writing to install or replace topsoil and re-vegetate the lot or panel of land so that at least forty (40%) percent of the said property is covered by vegetation at the conclusion of construction.

OWNER/AGENT
SIGNATURE: _____

TOWN MANAGER APPROVAL/COMMENT: _____