



BOXBOROUGH PLANNING DEPARTMENT
29 Middle Road, Boxborough, Massachusetts 01719
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www.boxborough-ma.gov

Earth Removal Permit Application Form ER-1

Applicant: _____
Mailing Address: _____
Town/State/Zip: _____
Telephone Number: _____ Email: _____
Property Owner: _____
Mailing Address: _____
Town/State/Zip: _____
Telephone Number: _____ Email: _____
Consultant/Engineer: _____
Mailing Address: _____
Town/State/Zip: _____
Telephone Number: _____ Email: _____
Excavation Company: _____
Mailing Address: _____
Town/State/Zip: _____
Telephone Number: _____ Email: _____

Property Location: _____

Assessor Parcel #: _____ Zoning: _____

Property Size: _____

Aquifer Protection District: Yes _____ No _____ W-District: Yes _____ No _____

Flood Plain: Yes _____ No _____

**Earth Removal Permit Application
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Present Use: _____ Proposed Use: _____

Project Description: _____

Earth Removal Area (s.f. or ac.): _____ Earth Removal Volume (c.y.): _____

Earth Taken Off-Site: Yes _____ No _____ Blasting: Yes _____ No _____

Truck Route: _____

Any trees greater than 6" dbh or major screening vegetation to be removed: Yes _____ No _____

Provide a detail description of erosion control measures: _____
