

**TOWN OF BELMONT  
EARTH EXCAVATION - ANNUAL REPORT TO PLANNING BOARD**

Provide all of the following information or mark as N/A if inapplicable to your site. Additional information should be provided as necessary to adequately report on the prior and upcoming year's activities. Reports are to be submitted annually by September 1<sup>st</sup> (or as otherwise directed by the Board). Once received an inspection of the site will be scheduled.

For the purpose of a compliance hearing, additional information, documents and fees are required in addition to this report. Refer to the Excavation Regulations and/or contact the Land Use Office for additional information.

In addition to the questions below please attach other documents as necessary including:

- copy of your site map, photos or an aerial photo showing any changes in the active, reclaimed and/or undisturbed areas
- copy of your most recent NH DRA Notice of Intent to Excavate Form
- copy of your most recent NH DRA Report of Excavation Form
- any photos that may better illustrate the information provided below
- copy of any new/renewed other agency permits (Alteration of Terrain, etc.)
- any new test pit data re: Seasonal High Water Table

**Updated Contact Information (as applicable):**

**Land Owner:** \_\_\_\_\_ **Tele:** \_\_\_\_\_ **e-mail:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

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**Land Owner Contact Person:** \_\_\_\_\_ **Tele:** \_\_\_\_\_ **e-mail:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

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**Excavator:** \_\_\_\_\_ **Tele:** \_\_\_\_\_ **e-mail:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

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**On-Site Contact Person:** \_\_\_\_\_ **Tele:** \_\_\_\_\_ **e-mail:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

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**Address of Property:** \_\_\_\_\_ **Tax Map & Lot #(s):** \_\_\_\_\_

**STATEMENT OF ASSURANCE**

I hereby certify that to the best of my knowledge this information is valid and that there is no violation of the approved ordinances, codes, and/or regulations of the Town of Belmont. I authorize the Members of the Board or their staff to enter onto my property and take both land and aerial photos for the purposes of reviewing the status of the excavation.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner or Authorized Individual

Be sure you have the most recent report form. Forms are available at [www.belmontnh.org](http://www.belmontnh.org). Please provide the following information as applicable. For your convenience additional sheets may be used as necessary or the information may be provided using a computer generated document. In that instance please follow the general format of this form.

1. \_\_\_\_\_ Amount of material Excavated during the last 12 months  
\_\_\_\_\_ Amount of material to be Excavated during upcoming 12 months
2. \_\_\_\_\_ Size of newly opened area(s) during last 12 months \_\_\_\_\_ Size of areas to be opened during upcoming 12 months  
\_\_\_\_\_ Size of newly closed area(s) during last 12 months \_\_\_\_\_ Size of areas to be closed during upcoming 12 months
3. Describe condition of any area(s) newly closed/reclaimed within last 12 months including info such as whether final slopes & drainage ways have been established, type/method of seeding, current condition of growth, etc.

\_\_\_\_\_  
\_\_\_\_\_

Describe condition of any area(s) previously closed/reclaimed.  
\_\_\_\_\_  
\_\_\_\_\_

4. Circle any processing equipment used on site within the last 12 months:  
**Crusher    Screen    Wash Plant    Other:** \_\_\_\_\_

Circle any processing equipment to be used on site within the next 12 months:  
**Crusher    Screen    Wash Plant    Other:** \_\_\_\_\_

5. Status of stump disposal (show on plan):  
**Buried on site    Stockpiled on site    To be/Ground    Other:** \_\_\_\_\_

List any material backhauled into the excavation site and how it will be/was used: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Elevation & Seasonal High Water Table (SHWT) Info:  
\_\_\_\_ft drop in lowest elevation of pit during previous 12 months  
\_\_\_\_ft drop in lowest elevation of pit proposed for upcoming 12 months.

\_\_\_\_ft distance between active excavation and SHWT (if located); **or**  
\_\_\_\_ft depth of deepest test pit in active area w/o locating SHWT

Describe any testing done/proposed to locate SHWT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

YES  NO Is any excavation occurring below the public highway elevation?

7.  YES  NO Have required setbacks to property lines and residences been maintained?  
 YES  NO Have required vegetation/screens within buffer areas been maintained?

Explain any encroachment issues: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Security:  
\_\_\_\_\_ Total acres of site to be open at one time during upcoming 12 months (this includes any areas for which reclamation is not completed).

Explain any proposal to have existing security adjusted: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Status of any recreational trails on property: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. For Sites that use On-Site Fueling:

- YES  NO All fueling occurs on fueling pad (minimum of 12" of compacted till or topsoil)
- YES  NO All persons fueling are trained in storage, handling and spill containment
- YES  NO Spill containment materials are readily available at fueling site(s)
- YES  NO Spill(s) occurred during prior 12 months. Describe: \_\_\_\_\_

For Sites that store fuel on site:

\_\_\_\_\_ gal \_\_\_\_\_ gal \_\_\_\_\_ gal \_\_\_\_\_ gal Size of fuel tank(s) stored on site

11.  YES  NO Are there portable/other toilet facilities on site?

12.  YES  NO Is the access locked?  YES  NO If locked is there a knox lock/box used?

13.  YES  NO Is the street number posted at the street?

14.  YES  NO Are slopes in excess of 1:1 barricaded?

15. Access to Public Highway:

Explain any work/maintenance proposed at site access to minimize tracking of material onto public highway: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Any additional information regarding this site: \_\_\_\_\_  
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