



City of San Clemente Engineering Division

910 CALLE NEGOCIO, SUITE 100 SAN CLEMENTE CA 92673
 Phone: (949) 361-6100
 Fax: (949) 366-4741
 E-mail: engineering@san-clemente.org

PERMIT NO.:
DATE ISSUED:
DATE EXPIRES:

ENCROACHMENT PERMIT STREET EXCAVATION AND CONSTRUCTION PERMIT

JOB ADDRESS: _____ TRACT/PM: _____ BLOCK: _____ LOT(S): _____

CROSS STREETS: _____ and _____

APPLICANT-OWNER- AUTHORIZED AGENT: _____ PHONE: _____

ADDRESS: _____

CONTRACTOR _____ PHONE: _____ STATE LICENSE# _____

ADDRESS: _____ *CITY LICENSE# _____

WORKMAN'S COMPENSATION POLICY NO.: _____

EXEMPT BY SECTION 3800 OF STATE LABOR CODE _____ SIGNATURE: _____ DATE: _____

DESCRIPTION OF WORK: _____

**CALL (949) 361-6131 FOR INSPECTIONS 48 HOURS PRIOR TO START OF WORK
 PRE-CONSTRUCTION MEETING WITH INSPECTOR IS REQUIRED
 NO WORK IS ALLOWED ON STREET SWEEPING DAYS-CHECK ONLINE AT SAN-CLEMENTE.ORG**

* MUST HAVE A CITY BUSINESS LICENSE (City Code Section 5.04.20) and A Certificate of Liability Insurance naming the City of San Clemente as additional insured.

<p style="text-align: center;"><u>PERMIT ISSUANCE:</u></p> <p><input type="checkbox"/> CURB & GUTTER _____ LF</p> <p><input type="checkbox"/> SIDEWALK _____ SF</p> <p><input type="checkbox"/> DRIVEWAYS _____ LF</p> <p><input type="checkbox"/> CURB CORES _____</p>	<p style="text-align: center;"><u>INSPECTION APPROVAL</u></p> <p>REMARKS: Standard Conditions for Encroachment Permit are attached.</p>						
<p style="text-align: center;"><u>ROADWAY EXCAVATION</u></p> <p><input type="checkbox"/> SEWER _____ # of Trenches</p> <p><input type="checkbox"/> WATER _____ # of Trenches</p> <p><input type="checkbox"/> STORM DRAIN _____ # of Trenches</p> <p><input type="checkbox"/> OTHER _____ SF</p> <p style="text-align: right;">TOTAL FEE \$ _____ 001-000-32340)</p>	<table border="1" style="width: 100%;"> <tr> <td style="width: 70%;">FINAL INSPECTION BY:</td> <td style="width: 30%;">DATE:</td> </tr> <tr> <td>BOND AMOUNT: \$ _____ (A bond of \$500 minimum, or \$50/sf., whichever is greater is required)</td> <td>BOND NO.:</td> </tr> <tr> <td>BOND RELEASED BY:</td> <td>DATE:</td> </tr> </table>	FINAL INSPECTION BY:	DATE:	BOND AMOUNT: \$ _____ (A bond of \$500 minimum, or \$50/sf., whichever is greater is required)	BOND NO.:	BOND RELEASED BY:	DATE:
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BOND RELEASED BY:	DATE:						

Applicant/Permittee ("Applicant") hereby agrees to comply with the following Standard Conditions, any special provisions which may follow, and all City Ordinances, Resolutions, Standards and Specifications currently in force. Applicant's signature shall confirm that Applicant has received and reviewed the conditions, understand the same and agrees to be bound thereby.

SIGNATURE: _____ DATE: _____
 Signature of Applicant or Authorized Agent

PRINT NAME: _____

PERMIT APPROVED BY: _____ DATE: _____
 City of San Clemente Engineering Division