



## Encroachment Permit Application

(fax to: (949) 425-3899  
attn: Public Works)

1. Applicant (Company) \_\_\_\_\_
2. Address : \_\_\_\_\_
3. City and Zip \_\_\_\_\_
4. Contact Person: \_\_\_\_\_
5. Phone Number: \_\_\_\_\_
6. Describe location of encroachment on City right of way (attach sketch if possible): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Encroachment permit is requested for the purpose of : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Estimated start date: \_\_\_\_\_
9. Encroachment duration (calendar days): \_\_\_\_\_
10. Encroachment to be completed by : \_\_\_\_\_
11. Contractor: \_\_\_\_\_
12. Field Contact Person: \_\_\_\_\_
13. Field Contact Phone Number: \_\_\_\_\_
14. Applicant's Signature: \_\_\_\_\_
15. Print Name: \_\_\_\_\_
16. Date: \_\_\_\_\_

Any questions regarding this permit application call (949) 425-2530.