

**City of Pacific Grove**

Community Development Department – Building Division

300 Forest Avenue, Pacific Grove, CA 93950

Main: (831) 648-3191 | Inspection: (831) 648-3191 | Fax: (831) 648-3184

www.cityofpacificgrove.org/building

OFFICE USE ONLY

Application No: _____

ENCROACHMENT PERMIT APPLICATION**SEC I: PROJECT INFORMATION**

Project Address		Assessor Parcel No.	
Project Duration			
Encroachment Type	Purpose of Permit		
<input type="checkbox"/> Driveway Approach			
<input type="checkbox"/> Sidewalk			
<input type="checkbox"/> Curb/Gutter/Ramp			
<input type="checkbox"/> Street Opening/Excavation			
<input type="checkbox"/> Temporary Encroachment			
<input type="checkbox"/> Permanent Encroachment			
<input type="checkbox"/> Wireless Antenna/Equipment			
Project Includes	<input type="checkbox"/> Block Sidewalk	<input type="checkbox"/> Blocking Travel Lane	<input type="checkbox"/> Blocking Parking Lane
	<input type="checkbox"/> Digging in the Street	<input type="checkbox"/> Trenching 5 ft or Deeper	<input type="checkbox"/> Impact to trees within Critical Root Zone*
	<input type="checkbox"/> Placing a container/pod/trash dumpster on the City Right of Way.		

* Critical Root Zone = 1.5 x tree diameter measured at 4 feet from grade. Convert resultant number to feet.

SEC II: APPLICANT INFORMATION

Primary Applicant is	<input type="checkbox"/> Property Owner <input type="checkbox"/> Licensed Contractor <input type="checkbox"/> Utility Company/Other		
OWNER	Name:	Phone:	Email:
	Mailing Address:		
CONTRACTOR	Name:	Phone:	Email:
	License Number:	License Class:	
	Mailing Address:		
UTILITY COMPANY /OTHER	Name:	Phone:	Email:
	Company Name:		
	Mailing Address:		

SEC III: APPLICANT DECLARATION

I certify that I have read this application and state that the above information is correct. I agree to comply with all City of Pacific Grove (City) ordinances and State Laws relating to Building Construction and hereby authorize City representatives to enter upon the above-mentioned property for inspection purpose. I understand that this is an application and NOT a permit or authorization to do any work without the Building Department review and approval, payment of all required fees, and signing all required documentation. I understand that this application will expire within 12 months from date of application if a permit is not obtained. I agree to abide by all provisions set forth in Title 15, PGMC.

I acknowledge understanding of the following requirements and agree to comply with the following requirements at the minimum:

- ☐ All traffic/pedestrian control plans must comply with the most recent California Edition of the Uniform Traffic Control Devices Manual;
- ☐ I must provide pedestrian warning signs at intersections/crosswalks stating "Sidewalk Closed. Use Other Side" and "Sidewalk Work Ahead";
- ☐ I shall call MST at (831) 899-5299 if bus stop or routes are disrupted;
- ☐ I shall call USA at 811 at least 48 hours before digging;
- ☐ I shall maintain a minimum of 3 feet clearance for accessibility at sidewalk;
- ☐ I shall reconstruct curb ramp per City requirements if curb ramps are disturbed in any way during construction; and
- ☐ I shall not cover or conceal any construction until the work is inspected, and the inspection is recorded on the job card and noted in the office. Inspections must be requested at least 24 hours in advance.

PRIMARY APPLICANT SIGNATURE	PRINT NAME	DATE