



Activity # _____

Public Works Permit Application

Date: _____

Project Address: _____

Applicant/Contact: _____

Name	Address
Phone/Fax	

Estimated Start Date & Time _____

End Date _____

Contractor/License Number _____

Description of Work:

Yes	No
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New/Replace: driveway, sidewalk,
curb & gutter?
Any trees nearby?

Digging in the street?
Trenching 5' or deeper?

Encroach (temp.) into City ROW?
blocking s/w?
travel lane?
parking lane?
diverting traffic?
(MST Notice?)

Encroach-Perm.into City ROW?

Purpose?
*(Any permanent structures,
elements into/onto City ROW)*

Signature/Print name _____

Date _____