WORKSHEET FOR ENCROACHMENT PERMIT
CITY OF NEWPORT BEACH
PUBLIC WORKS DEPARTMENT

COMPLETE THE BELOW INFORMATION

PROJECT ADDRESS:

DETAILED DESCRIPTION OF PROPOSED WORK:

APPLICANT: ___________________________ Phone: ___________________________
Email Address: _________________________ Mailing Address: _______________________
City/State/Zip: _________________________

OWNER: ___________________________ Phone: ___________________________
Email Address: _________________________ Mailing Address: _______________________
City/State/Zip: _________________________

ALL CONTRACTOR INFORMATION IS REQUIRED-PLEASE COMPLETE

CONTRACTOR: ___________________________ Office Phone: ___________________________
Company (if different): ___________________ Jobsite Phone: ___________________________
Other Phone: ___________________________
Email Address: _________________________ Mailing Address: _______________________
City/State/Zip: _________________________
State License Number & Class: ___________________ Expires: ___________________
City Business License Number: ___________________ Expires: ___________________
WORKERS COMPENSATION INSURANCE - Certificate of insurance (Section 3800 Labor Code)
Company: ___________________ Policy No: ___________________ Expires: ___________________

REFUNDABLE DEPOSIT INFORMATION (If Applicable):
Refund Payable To: _________________________ Mail Refund To: ___________________________

FOR OFFICE USE ONLY
Special Conditions of Permit: ___________________________

ADDITIONAL APPROVAL REQUIRED FROM THE FOLLOWING DEPARTMENTS
Utilities: ___________________ Traffic: ___________________ Fire: ___________________
General Services: ___________________ Other: ___________________
Engineering Technician: ___________________ Public Works Specialist: ___________________ Date: ___________________ Permit No: ___________________