CITY OF DEL REY OAKS
ENCROACHMENT/STREET OPENING PERMIT

Date: _____ Application No. _____

Property Owner: _____ Phone No.: _____

Property Address: _____

Mailing Address (if different):_____

Owner hereby applies for a permit for the purpose of construction (build, change, or break) on City Property.

Choose One:	Choose One:	Proposed Starting Date & Time	Estimated Date of Completion

Description of Work: (Include square footage, dimensions, and estimate of dollar value of job)

(Fill in field or attach separate sheet)

Applicant agrees that work will be done in accordance with existing City Ordinances and that he/she will comply with the General Conditions listed on the attachment.

Signature of Applicant: _____ Date: _____

For Office Use Only

(Circle all that apply)

Permit is approved: YES NO

Permit is approved with special conditions of approval which are a part of the permit: YES NO

Permit application is referred to the City Council for their considerations and action: YES NO

Authorized by: _____ Date: _____

Note: Your approved application is the permit. Payment must be received prior to processing.