



TEMPORARY ENCROACHMENT PERMIT APPLICATION

City of Carmel-by-the-Sea
Department of Community Planning & Building
P.O. Drawer G, Carmel, CA 93921
(831) 620-2010 OFFICE

TEMP EN _____
FEE PD _____
REC # _____
Copy Given to: _____
Date: _____

1. Property Owner: _____ Date: _____

2. Project Location: _____

Block: _____ Lot(s): _____ Parcel #: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

3. Contractor/Contact Person (Circle One): _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Telephone # (_____) _____ E-Mail: _____

Contractor State Lic #: _____ Contractor City Lic #: _____
Type: _____

4. Date Work is Scheduled to Begin: _____ Projected Completion Date: _____

PLEASE ATTACH SITE PLAN AND PHOTOS DETAILING PROPOSED

FULLY DESCRIBE ALL WORK PROPOSED: _____

→PLEASE NOTIFY **USA DIG** (Call 811) **48 HOURS PRIOR** TO DIGGING

→PLEASE NOTIFY **PUBLIC WORKS DEPT.** (831-620-2074) **48 HOURS PRIOR** TO START OF WORK

→CONTROL OF DRAINAGE DURING **AND** AFTER CONSTRUCTION IS **REQUIRED.**

Applicant Acknowledgement

I understand and agree to comply with all pertinent conditions, standards and requirements as specified by the Carmel Municipal Code, State, County and Federal regulations pertaining to this permit application. I agree to properly maintain the subject work at no expense to the *City* and to indemnify the *City* from any liability arising from the permit issued. Acceptance by the *City* of the work described hereon is not a waiver of my obligations as stated herein.

Applicant Name (Print Clearly): _____

Signature: _____ Date: _____

CITY USE ONLY BELOW

Public Works: Approve/Disapprove

Forestry/Beach: Approve/Disapprove

By: _____ Date: _____

By: _____ Date: _____

Comments/Conditions:

Please protect all trees during construction:

→HAND DIG WITHIN 10 FEET OF TREES.

→NOTIFY FORESTER OF ROOTS 2” OR MORE THAT NEED TO BE CUT.

FINAL INSPECTION FROM PUBLIC WORKS: _____

DATE: _____