

DEVELOPMENT SERVICES ENGINEERING DIVISION ENCROACHMENT PERMIT APPLICATION

311 VERNON STREET • ROSEVILLE, CA 95678 PHONE (916) 774-5339

3 SETS OF PLANS MUST BE SUBMITTED WITH EACH APPLICATION

(Print or type)	
Project Name	
Address of Project	
Project Description	
Expected Start Date:	Expected Completion Date:
Estimated Cost of Project:	
PROPERTY OWNER or DEVELOPER (print or type)	
Name	Day Phone
Address	
Name Signature	Date
Note – Signatures provided by facsimile transmission or in PDF format shall be deemed to be original signatures.	
APPLICANT (print or type)	
	Day Phone
Address	
Email address:	
Name Signature	Date
T are decided to the second of	
I certify that insurance will be maintained in ac and 13.28.130.	ecordance with the City of Roseville Municipal Code Sections 13.28.020
Note – Signatures and initials provided by facsimile tran	nsmission or PDF format shall be deemed to be original signatures.
TO BE COMPLETED BY STAFF	
Date Received:	Received By:
	·
Tracking? Y N City Job #	
Insurance Expiration Date Ri	sk Management Approval
Bond Required? Y N Bond Number:	Permit Fee:
Ready to Issue? Y N	
DS – Engineering Approval	