



CITY of CLOVIS

1033 FIFTH STREET • CLOVIS, CA 93612

ENCROACHMENT PERMIT APPLICATION

Project Location

Duration of project

Start Date

Description of Work

Print Name of Applicant

Company Name

Address, City, State, Zip

E-Mail

Phone

Provide the following information for all Contractors who will work under this Permit

1. Liability Insurance Cert (for each contractor) with City of Clovis listed as additionally insured.
2. Traffic Control Plan per CAMUTCD standards when affecting vehicular or pedestrian traffic.
3. Name of Contractor or Sub CSLB # City of Clovis Business License #

The undersigned hereby applies for permission to excavate, construct and or otherwise encroach on the public Right-of-Way or easement by performing the afore mentioned work in accordance with the City of Clovis Standard Drawings, Specifications, the submitted plans and or any other documents attached to the approved permit. CMC 7.2.01-7.2.08

Signature of Applicant

Date

TO SUBMIT THIS FORM AND ADD ATTACHMENTS PRESS BUTTON



THIS AREA IS FOR CITY OF CLOVIS USE ONLY