

**OFFICE USE ONLY**

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Encroachment Permit Number

Fee Paid:

Receipt No.:

Pre-Approval: ☐ Date:Permit Issuance: ☐ Date:

Approved by:

**ENCROACHMENT PERMIT APPLICATION****CITY OF PLACERVILLE  
ENGINEERING DEPT.**3101 Center Street  
Placerville, CA 95667

(530) 642-5250

[engineering@cityofplacerville.org](mailto:engineering@cityofplacerville.org)<https://www.cityofplacerville.org/engineering>**SUBMIT APPLICATION ELECTRONICALLY TO:**[engineering@cityofplacerville.org](mailto:engineering@cityofplacerville.org)**APPLICANT INFORMATION:**

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_ City Business License No.: \_\_\_\_\_

**APPLICATION TYPE:**Type 1 – General Construction, Utility Work ☐Type 2 – No Dig/No Traffic Control ☐Quarterly Vegetation Management (QVM) ☐**Application Date:** \_\_\_\_\_

Work to be performed by:

Applicant ☐Contractor ☐**DESCRIPTION OF WORK/LOCATION (Type 2 or QVM only):**

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**TYPE 1 PERMIT INFORMATION:**Request for Pre-Approval ☐Application or Resubmittal for Permit Issuance ☐**Location**

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**Scope/Description of Work**

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**Number of Working Days:** \_\_\_\_\_

Is this overhead utility work or a pole relocation located within the state designated Scenic Corridor of US Highway 50? (Check one.)

Yes ☐ No ☐

If yes, provide proof of CPUC approval or exemption.

Do you require the use of City parking spaces? (Check one.)

Yes ☐ No ☐

If yes, provide the location and number of spaces \_\_\_\_\_

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**Information Required for Type 1 Permit Issuance:**

Contractor (if different from Applicant): \_\_\_\_\_

Class A Contractor's License Number: \_\_\_\_\_

Contractor's City Business License Number: \_\_\_\_\_

Contact Information for Point of Contact in the Field (Superintendent, etc.): \_\_\_\_\_

Planned Start Date: \_\_\_\_\_

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**Application Attachments (Required)**

Plans ☐ Traffic Control Plans ☐ Certificate of Insurance ☐ Bond ☐

Certificate of Monument Preservation ☐ Pedestrian Traffic Control Plan/Description ☐

Request for Monument Preservation Certificate Waiver ☐

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By signing this application, the Applicant agrees to the attached Encroachment Permit Terms and Conditions and acknowledges all City Codes requirements are to be adhered to. Failure to adhere to any of the Conditions, Codes, or Ordinances, or deviation from the approved scope of work constitutes breach of contract and will result in the revocation of this permit and applicable fines and penalties per City Code Section 1-4-5.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Attachments:**

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| 1. Encroachment Permit Terms and Conditions | 3. Survey Monument Policy        |
| 2. Insurance Requirements                   | 4. Restoration and Trench Detail |

**Additional Notes:**

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