

PLEASE FILL OUT THE ENTIRE FORM AND SUBMIT TO
DEVELOPMENT SERVICES - ENGINEERING DIVISION
ANY QUESTIONS CALL (310) 952-1795

Permit Type

Construction
 Excavation
 Encroachment
 Trash Bin/Container

CITY OF CARSON
ENGINEERING SERVICES PERMIT

PERMIT APPLICATION

ESTIMATED
START DATE

APPLICANT

Applicant _____ Company _____

Mailing Address _____ E-mail _____

City _____ State _____ Zip Code _____ Telephone _____

Emergency Name _____ Emergency Phone _____

JOB SITE

Location Type

Residential Commercial

Existing Improvements

CurbGutter Sidewalk Pavement Parkway

Address _____ Dir _____ Street _____ Cross Street _____

Location Description

Purpose

- Trash Bin/ Container
- Street Closure
- Development Construction

Estimated Days of Work

	Pavement	Driveway	Curb and Gutter	Sidewalk
QUANTITY or MEASUREMENTS	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>