

FOR COUNTY USE ONLY
RECORD ID:
DPW20
RWCONP-

APPLICATION FOR CONSTRUCTION PERMIT
COUNTY OF SAN DIEGO
DEPARTMENT OF PUBLIC WORKS
 5510 OVERLAND AVENUE, SUITE 110
 SAN DIEGO, CA 92123
 PHONE (858) 694-2055 • FAX (858) 279-7020
 E-mail ROWPERMITCOUNTER@SDCOUNTY.CA.GOV

Date _____

THOMAS GUIDE		
YEAR/ EDITION	PAGE	COORD

Permit Owner and Permit Owner's Contractor hereby apply to construct on the public highways, subject to provisions of Title 7, Division 1, of San Diego County Code of Regulatory Ordinances. Permit revocable at the discretion of the Director, Department of Public Works.

Permit Owner _____
First & Last Name or Organization Name

Mailing Address _____
Street City State Zip Code

Email _____ Telephone # _____

Application Contact Name _____ Email Address _____ Telephone # _____

Is this a Broadband Project? YES ☐ NO ☐

Is the work part of a larger project or program requiring multiple permits, or currently under review for permit? YES ☐ NO ☐

If yes, provide: Related Permits _____ Assessor Parcel # _____

Is this a utility relocation related to a County Capital Improvement Project? YES ☐ NO ☐

If yes, provide name of project _____

Location of work _____
Street Name and Number (describing full extent of work area) Community

Check improvements in place: ☐Curb ☐Gutter ☐Sidewalk ☐Pavement ☐Other _____

INSTALLATION	LENGTH	WIDTH	INSTALLATION DESCRIPTION - MATERIALS, STANDARD, EXTENTS, ETC.
COMMERCIAL/RESIDENTIAL DRIVEWAY			
PRIVATE TO PUBLIC ROAD APPROACH			
CURB			
GUTTER			
SIDEWALK			
PAVEMENT			
RETAINING WALL			
OTHER			

As a condition of the granting of this permit and in accordance with Section 71.103 of the San Diego County Code of Regulatory Ordinances, I agree to indemnify, hold harmless and defend the County and each of its officers and employees from any liability of responsibility for accident, loss or damage to persons or property arising by reason of the work done by Permit Owner, or Permit Owner's agents, employees or representatives.

I declare under penalty of perjury under the laws of the State of California that the statements made herein are true and correct.

Permit Owner's Signature _____ Date _____

As a condition of the granting of this permit and in accordance with Section 71.102.1 of the San Diego County Code of Regulatory Ordinances, I hereby affirm that I am licensed under provisions of Chapter 9 of Division 3 of the State of California Business and Professions Code, commencing with Sec. 7000, to perform the work stated on this permit, my license is in full force and effect, and I will maintain a valid Certificate of Liability Insurance naming the County of San Diego as certificate holder and an additionally insured party for the duration of this permit.

Contractor _____ CA license # & _____
 Expiration Date _____

Email _____ Phone _____

Contractor's Signature _____ Date _____