

City of Palo Alto Public Works Engineering Phone: 650/329-2151 FAX: 650/329-2240 Inspection: 650/496-6929

## **APPLICATION AND PERMIT FOR EXCAVATION AND GRADING**

A1.       Property Street Address       APN       Permit Number:         ***SECTION B – APPLICANT INFORMATION***         B1.       Applicant's Name         B2.       Applicant's Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.         City       State         B3.       Applicant's Telephone Number         B4.       Property Owner's Name         D       Check Here If Same As Applicant And Skip to Section C         B5.       Property Owner's Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.         City       State         ZIP Code         State       ZIP Code         City       State         ZIP Code       State         City       State         ZIP Code       State         City       State         ZIP Code       Cotractor's Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.         City       State       ZIP Code         SECTION C – CONTRACTOR INFORMATION       Contractor's License Nur         C1.       Prime Contractor's Company Name       Contractor's License Nur			
B1. Applicant's Name         B2. Applicant's Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.         City       State       ZIP Code         B3. Applicant's Telephone Number       *       *         B4. Property Owner's Name       □ Check Here If Same As Applicant And Skip to Section C       *         B5. Property Owner's Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.          City       State       ZIP Code         State       ZIP Code       *			
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City State ZIP Code SECTION C – CONTRACTOR INFORMATION			
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	ıber		
C2. Prime Contractor's Representative's Name   Check here if same as applicant and skip to line C6			
C3. Prime Contractor's Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			
City State ZIP Code			
C4. Prime Contractor's Telephone Number C5. Prime Contractor's Scope of Work			
C6. Grading/Excavation Subcontractor's Company Name	ion D		
C7. Grading/Excavation Subcontractor's Representative's Name Contractor's License Nur	ıber		
. Grading/Excavation Subcontractor's Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			
City State ZIP Code			
C9. Grading/Excavation Subcontractor's Telephone Number C10. Grading/Excavation Subcontractor's Scope of Work	C10. Grading/Excavation Subcontractor's Scope of Work		
C11. D Check here if additional subcontractors will perform any work in relation to this application and attach separate sheet			
***SECTION D – SITE MAP AND GRADING PLAN PREPARER INFORMATION***			
D1. Preparer's Name Telephone Number Professional License Nur	ıber		
Preparer's Title Company Name			
D3. Preparer's Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			
City State ZIP Code			
SECTION E – EROSION AND SEDIMENT CONTROL PLAN PREPARER INFORMATION			
<ul> <li>Check here if interim and final plans are not prepared by the same person and provide additional information on separate sheet</li> <li>Check here if preparer same as section D and skip to section F</li> </ul>			
E1. Preparer's Name Professional License Nur	ıber		
E2. Preparer's Title Company Name			
E3. Preparer's Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			
City State ZIP Code			
SEE REVERSE			

	SECTION F – SOILS REPO	RT PREPARER INFORMAT	ION			
	Check here if soils engineering and engineering geology reports are not prep Check here if preparer same as section D and skip to section G	pared by the same person and pr	ovide additional information on separate sheet			
	Preparer's Name	Telephone Number	Professional License Number			
F2.	Preparer's Title	Company Name				
F3.	Preparer's Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.				
	City	State	ZIP Code			
	SECTION G – EXPORTED SC	OILS RECEIVER INFORMAT	ΓΙΟΝ			
	Check here no soil material will be exported from site and skip to section H	Telenhene Number				
GI.	Receiver's Name	Telephone Number				
G2.	Receiver's Title	Company Name				
G3.	Receiver's Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	ſ			
	City	State	ZIP Code			
	***SECTION H – REQU	UIRED ATTACHMENTS***				
	eck each item to indicate required attachments have been submitted and atta Check here if the building official or city engineer has required supplementa ow or attach separate sheet with explanation, if necessary.					
H1.	Vicinity map showing the location of the site in relationship to the surrout	nding area's watercourses and o	ther significant geographic features			
H2.	12. 🛛 Grading plan showing locations and quantities of proposed excavations and fills (see checklist for other grading plan requirements)					
H3.	Interim erosion and sediment control and storm water pollution prevention	on plan (see checklist for SWPPF	P requirements)			
H4.	<ul> <li>Final erosion and sediment control and storm water pollution prevention</li> </ul>	plan				
H5.	<ul> <li>Soils engineering report</li> </ul>					
H6.	Engineering geology report					
H7.	Detailed work (construction) schedule including descriptions of proposed	d site conditions on dates: July 1	5, August 15, September 15, October 1 and 15			
H8.	Map showing proposed haul routes within the city for use by all construct	ction traffic to and from work site				
H9.	<ul> <li>Shoring plan stamped &amp; signed by engineer</li> </ul>					
H10	0.	ivision of Occupational Safety & I	Health)			
411	.  Tree protection plan					
1.	The city engineer has required the posting of a performance bond in confor If yes, attach details on separate sheet.	rmance with Municipal Code sec	tion 16.28.170: □ Yes □ No			
	SECTION J – PROPERTY OWNER (OR OW	VNER'S REPRESENTATIVE	) CERTIFICATION			
knoi	property owner or owner's representative who is listed in Section B must sig wledge. I understand that this application to engage in activities permitted b vision of said chapter shall be guilty of a misdemeanor and upon conviction t	y Municipal Code Chapter 16.28	is binding and any applicant violating any			
	Property Owner's or Owner's Authorized Representative's Name					
J2.	Signature	Date				
J3.	Comments					
			Check here if additional comments attached			
24	City Official's Name	- FOR CITY USE	alication Date			
			plication Date			
<u>&lt;2</u> .	City Official's Signature	Pe	rmit Issuance Date			
<3.	Amount of Cut & Fill (cubic yards)					
<b>&lt;</b> 4.	Amount of Grading/Excavation Permit Fee Paid					

## CONTACT PUBLIC WORKS INSPECTOR (650-496-6929) AT LEAST 24 HRS PRIOR TO START OF WORK

\*\*\*Section is required for initial application submittal\*\*\*