CITY OF VALLEJO

Central Permit Center

555 SANTA CLARA STREET • VALLEJO • CALIFORNIA • 94590-5934 • www.cityofvallejo.net

EXCAVATION PERMIT APPLICATION

1. Applicant Name _____ _____
First and Last Phone Number

Mailing Address _____
Street

_____
City State Zip

2. Name of Contractor _____ _____
First and Last Phone Number

Address _____
Street

_____
City State Zip

3. Contact _____ _____
First and Last Phone Number

Mailing Address _____
Street

_____
City State Zip

4. Location of Work _____
Street

_____
City State Zip

5. Description of the proposed work (and attach appropriate plans and specifications):

_____

_____

_____

6. Engineering information:

Excavation Type: ☐ Open Cut ☐ Horizontal Directional Drill ☐ Others
Surface Type: ☐ Concrete ☐ Asphalt ☐ Landscape ☐ Others

(Fill in completely where applicable)

Length of proposed excavation _____ Width of proposed excavation _____

Minimum depth of proposed excavation _____ Maximum depth of proposed excavation _____

Length of proposed horizontal directional drilling _____ Diameter of drill head _____

Will import backfill be used? ☐ YES ☐ NO USA ID #_____

If imported material is used, where will the native material be deposited?

_____

_____