



COUNTY OF SAN BERNARDINO – DEPARTMENT OF PUBLIC WORKS  
 PERMITS/OPERATIONS SUPPORT DIVISION - TRANSPORTATION  
 825 E. THIRD STREET ROOM 108  
 SAN BERNARDINO, CA. 92415-0835  
 (909)387-1863

**APPLICATION FOR EXCAVATION PERMIT**

The undersigned hereby applies for permission to excavate, and/or otherwise encroach on County Road right-of-way by performing the following work and agrees to do the work in accordance with all applicable laws and regulations and subject to the approval of and the inspection by the San Bernardino County Department of Public Works-Permits/Operations Support Division-Transportation.

LOCATION OF WORK: \_\_\_\_\_  
 ADDRESS (IF AVAILABLE) STREET NAME (IF MORE THAN ONE STREET, ATTACH LISTING)

BETWEEN WHAT INTERSECTING STREETS AREA (CITY, TOWN, ETC.)

START DATE OF WORK (include min. 2 weeks time for permit process) ASSESSORS PARCEL NUMBER

UTILITY: GAS \_\_\_\_\_ PHONE \_\_\_\_\_ ELECTRICAL \_\_\_\_\_ SEWER \_\_\_\_\_ CATV \_\_\_\_\_ WATER \_\_\_\_\_

TOTAL LENGTH OF EXCAVATION	TOTAL WIDTH OF EXCAVATION	DEPTH OF PIPE	CONDUIT MATERIAL	CONDUIT SIZE (DIA.)	WORK ORDER NO.

**DESCRIPTION OF WORK:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Is coverage under the State Construction General Permit ([http://www.swrcb.ca.gov/water\\_issues/programs/stormwater/construction.shtml](http://www.swrcb.ca.gov/water_issues/programs/stormwater/construction.shtml)) required for this project?  YES  NO  
 If Yes, provide WDID number: \_\_\_\_\_ If no, provide justification: \_\_\_\_\_

PERSON IN CHARGE OF FIELD WORK: \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

EMAIL ADDRESS FOR FIELD CONTACT: \_\_\_\_\_ CONTRACTOR'S LICENSE NO. \_\_\_\_\_

Work Guaranteed By: Resolution \_\_\_\_\_ Franchise \_\_\_\_\_ Bond \_\_\_\_\_ Cash Deposit \_\_\_\_\_

CONTRACTOR/CONSULTANT (BUSINESS NAME)

NAME OF PERMITTEE (PROPERTY OWNER/UTILITY PURVEYOR)

\*AUTHORIZED SIGNATURE DATE

\*AUTHORIZED SIGNATURE DATE

PRINT NAME

PRINT NAME

MAILING ADDRESS

MAILING ADDRESS

CITY STATE ZIP CODE

CITY STATE ZIP CODE

(AREA CODE) PHONE NUMBER

(AREA CODE) PHONE NUMBER

**Permit issuance will be withheld without the required information  
 \*Only one signature required for the application**