

**WORKSHEET FOR ENCROACHMENT PERMIT  
CITY OF NEWPORT BEACH  
PUBLIC WORKS DEPARTMENT**

**COMPLETE THE BELOW INFORMATION**

**PROJECT ADDRESS:**

**DETAILED DESCRIPTION OF PROPOSED WORK:**

**APPLICANT:**

**Phone:**

**Email Address:**

**Mailing Address:**

**City/State/Zip:**

**OWNER:**

**Phone:**

**Email Address:**

**Mailing Address:**

**City/State/Zip:**

**ALL CONTRACTOR INFORMATION IS REQUIRED-PLEASE COMPLETE**

**CONTRACTOR:**

**Office Phone:**

**Company (if different):**

**Jobsite Phone:**

**Other Phone:**

**Email Address:**

**Mailing Address:**

**City/State/Zip:**

**State License Number & Class:**

**Expires:**

**City Business License Number:**

**Expires:**

**WORKERS COMPENSATION INSURANCE - Certificate of Insurance (Section 3800 Labor Code)**

**Company:**

**Policy No:**

**Expires:**

**Municipal Operations: 949-644-3055**

**Utilities: 949-644-3011**

**Urban Forestry: 949-644-3083**

**FOR OFFICE USE ONLY**

**Special Conditions of Permit:**

**ADDITIONAL APPROVAL REQUIRED FROM THE FOLLOWING DEPARTMENTS**

**Utilities:**


**Traffic:**

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**Fire:**

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**Municipal Operations**

**Other:**

**Engineering Technician:**

**Permit Specialist**

**Date:**

**Permit No.**

**N2025-**