COUNTY OF SAN JOAQUIN, DEPARTMENT OF PUBLIC WORKS

Application No. ___________________
(For Office Use Only)

APPLICATION FOR A PERMIT

1. Description of proposed work: ________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

2. Location: ____________________________________________________________________________

Section _______, Township _______, Range _______, Mount Diablo Base and Meridian
San Joaquin County Assessors Parcel Number__________________

3. _________________________ ___________ of __________________________________________
(Owner of property) (Address)

 ________________________ ___________ __________________________
(City) (State) (Zip) (Phone Number)

4. _______________________________ of __________________________________________
(Name of Permittee -Entity Doing the Work)

 ________________________ ___________ __________________________
(City) (State) (Zip) (Phone Number)

5. Endorsement: (of other Agencies)

We, the representatives of ________________________________
(Agency Name)

approve this plan, subject to the following conditions:

☐ Conditions listed on the back of form ☐ Conditions attached ☐ No Conditions

 ________________________ ___________ __________________________
(Signature) (Date) (Signature) (Date)

6. Names and addresses of property owners sharing a common boundary with the land upon which the
contents of this application apply. If additional space is required, list names and addresses on the back of
form or on an attached sheet.

Continued on next page
7. Has an environmental determination been completed for the proposed work according to the California Environmental Quality Act of 1970? □ Yes □ No □ Pending

If yes or pending, give the name and address of the lead agency and State Clearinghouse Number: _____________________________________________________________

SCH No. ____________________________________________

8. Please check exhibits accompanying this application:
   a. □ Map showing the location of the proposed work
   b. □ Drawing showing plan and elevation views of the proposed work, scale, and materials of construction
   c. □ Drawing showing the cross section dimensions and elevations of levees, berms, stream banks, flood plane, low flow
   d. □ Drawings showing the profile elevations of levees, berms, flood plane, low flow

9. Is the applicant acting for the owner of the proposed works? □ Yes □ No

If yes, the name, address, and telephone number of the owner:

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

(Signature of Owner)  (Date)

(Signature of Applicant)  (Date)

For additional information:

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