

## Permit Center

2263 Santa Clara Ave. Room 190, Alameda, CA 94501  
 Hours: 7:30 a.m.–3:30 p.m., M–Th  
 510.747.6800 – TDD 510.522.7538  
[www.alamedaca.gov/permits](http://www.alamedaca.gov/permits)  
[Permits@alamedaca.gov](mailto:Permits@alamedaca.gov)

## PERMIT APPLICATION

Permit # PWD \_\_\_\_\_  
 Receipt #, amt collected \_\_\_\_\_  
 Receipt #, amt collected \_\_\_\_\_

Job Address: \_\_\_\_\_ Job Valuation, this permit: \_\_\_\_\_

-Demo -Grading -Utilities -Streets -Parks/Landscaping -Marine -Other \_\_\_\_\_

Description of Work: \_\_\_\_\_

\_\_\_\_\_

Is this application associated with a larger project? If so, note any planning, building, and/or encroachment permits, and general phasing of work:

\_\_\_\_\_

Estimated Dates: Start work \_\_\_\_\_ Likely duration \_\_\_\_\_

Applicant Attachments:  Site Plan  C3 Checklist  Waste Mgmt Plan  Geotech Report  Other \_\_\_\_\_

	APPLICANT:	PROPERTY OWNER:	RESPONSIBLE FINANCIAL PARTY:
Name, Title:	_____	_____	_____
Company Name:	_____	_____	_____
Street Address:	_____	_____	_____
City, State, Zip:	_____	_____	_____
Phone:	_____	_____	_____
Email:	_____	_____	_____
License #/Type:	_____	_____	_____

I certify that I have read the application and state that the information given is true and correct. I agree to comply with all local ordinances and state laws relating to construction and I make this statement under penalty of law. I hereby authorize representatives of the City of Alameda to enter upon the above-mentioned property for inspection purposes. A fee deposit is collected prior to review and approval of application. Additional hours may be billed for at a later date.

Applicant (Print Name): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Responsible Party (Print Name): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_