

## **Construction/Maintenance Project Permit**

Community Development Department Planning Division 100 Civic Center Drive / P.O. Box 1768 Newport Beach, CA 92658-8915 (949) 644-3204 Telephone / (949) 644-3229 Facsimile www.newportbeachca.gov

OFFICE USE ONLY
File Date:
Fee:
Payment Type:
Receipt No.:
Remarks:

Property Owner(s)			
Name			
Address	City, State	Zip Code	
Email	Phone No.	Fax. No	
Applicant(s)			
Name			
Address	City, State	Zip Code	
Email	Phone No.	Fax No.	
Site/Project		1	
Address	As	Assessor's Parcel No.	

## **Application Requirements**

This application shall be completely filled out and accompanied by the following information:

A. Four (4) sets of reduced 11"x17" site plans drawn to scale and dimensioned, depicting the proposed location of the construction or maintenance project in relation to property lines, setbacks, and any

structures on the site.	
<ul> <li>B. A description of the construction or maintenance proj scope of work.</li> </ul>	ect, including the precise nature of the project and
C. The estimated completion date for the construction of	or maintenance project.
Property Owner's Affidavit	
(I) (We)	er certify, under penalty of perjury, that the foregoing
Signature(s):	Date:
	Date:
NOTE: An agent may sign for the owner if written authorization from	the record owner is filed with the application.