



**TOWN OF LOS GATOS
ENCROACHMENT PERMIT APPLICATION**

Application Date: _____ Permit No. **EN** _____

Project Address: _____ APN: _____

Work Description: _____

Location of Work (if not at address frontage): _____

Cost of Work in the Public Right-of-Way (Required): _____ Depth of Trench: _____

Estimated Date of Completion of Work: _____ Your Job # _____

ADDITIONAL INFORMATION:

1. Property Owner/Applicant (circle one):

Name: _____ E-mail: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

NOTE: Contractor information must be supplied to the Engineering Inspector prior to the start of construction.

2. General Contractor in charge of work at the site:

Name: _____ E-mail: _____

Firm: _____ Town Business License No: _____

License No.: _____ Class: _____ Exp. Date: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Any questions regarding Encroachment Permits, please call Steve Souza, Sr. Engineering Inspector at (408) 395-3430. All work in the Public Right-of-Way requires an Encroachment Permit. Failure to obtain a Permit may result in penalties per Town Code - Chapter 23, Article III, Encroachments. (It may take up to 10 working days to process this application)

SIGNATURE OF OWNER (REQUIRED):

Date: _____

Print Name: _____ Title: _____

SIGNATURE OF APPLICANT (IF OTHER THAN OWNER):

Date: _____

Print Name: _____ Title: _____

FOR OFFICIAL USE ONLY:

Indemnity Agreement Required: **Yes** **No** (circle one) Date Returned: _____

Approved by: _____ Date: _____

Notes: