



Permit No. SE
____ - ____ - ____

CITY OF RIO VISTA

APPLICATION FOR **SPECIAL EVENT ENCROACHMENT ON CITY STREETS**

To: Department of Public Works, Administration, City Hall, Rio Vista, California

From: _____
(Name, Organization) (Address & City) (Phone number)

I (or We) hereby apply for an encroachment permit to carry out the following work:

Estimated start date of encroachment: _____
Estimated date of completion: _____

DIAGRAM OF LOCATION OF PROPOSED WORK

Note: Show dimension referenced from curb to curb returns or from permanent object in vicinity of encroachment. Indicate geographical direction. **(Diagram may be attached or drawn on back of this form.)**

I (or We) have read the Rio Vista Street Encroachment Ordinance Number 195 and agree to comply with the provisions of these and all other City Ordinances and Standard Specifications.

(Signature)

ENCROACHMENT PERMIT GRANTED

(Date) (City Inspector)

Permit Fee.....	\$	<u>100.00</u>
Inspection Fee.....	\$	_____
Other Charges.....	\$	_____
TOTAL CHARGES	\$	_____
Payment/deposit - Receipt No. _____	Less Amount Paid	\$ (_____)
	Balance Due	\$ _____