CITY OF SOLANA BEACH ENGINEERING DEPARTMENT REQUEST FOR RELEASE OF ENCROACHMENT CASH DEPOSIT

PROJECT INFORMATION	Date/
Applicant Nan	ne:
Project Addre	ess:
Project APN	
MAIL CHECK TO	
DEPOSIT RECEIPT INFORMATION	
Recei	pt No:
Recei	pt Date:/
Amount: \$	
REQUEST	
I am the(Owner/Contractor/Agent)	of and request the release of
bond / cash deposit securing Encroachr	nent Permit#
Print Name:	Phone No:
Signature:	Date/
- FOR CITY USE ONLY -	
Closed out encroachment permit #C	COSB on: / / by Eng. Staff
	City Engineer:signature