

## **County Property Permit Application**

300 N. Flower Street Santa Ana, CA 92703



714.667.8888

714.667.8885

County of Orange

Today's Date:			Pe	ermit #:				
		TYPE OF	PERMIT					
☐ ROAD ENCROACHMENT ☐ FLOOD ENCROACHMENT ☐ JWA ENCROACHMENT ☐ LARGE EVENTS ☐ BUS, BENCH, AND SHELTER ☐ OC WASTE & RECYCLING			FILMING/PHOTOGRAPHY  UTILITIES  TRANSPORTATION  SUNSET BEACH PARKING EMERGENCY  OTHER					
		PROJECT INF	ORMATION					
Location/Add ress of Project Work:  Nearest Cross		omas Guide	City Assessor Nu	Parcel mber/	Zip			
Street: Project Job		rid #:	Trac	t/Lot :				
Current Related Permits:								
Facility:	Name	,	/ Number	/	☐ Flood  Type	Road		
		CONTACT INF	ORMATION					
OWNER NAME:	Name	/ F	Phone Number	/	Email			
Owner Address:	Address		City		Zip			
CONTRACTOR:	Name	/	License #	/	Email			
Contractor Address:		Phone Number:						
Agent/Contact Person*	l		Affiliat	tion:				
Phone Number:		Fax:		Email:				
ENGINEER:	Name	/	License #	/	Email			
Engineer Address: *If different than must sign & c all plan check correction and c				one Number plication. T		ited to, contact for		

## COUNTY OF ORANGE | OC PUBLIC WORKS | OC PLANNING

Applicable to Filming Permits ONLY							
EVENT NAME (TITLE)							
Event Information:		/,		/	/		/
	Dates		Exact Hours		Total Days	# of Personnel	# of Vehicles
Location Manager:		. 1		/ 7.7: 1	Phone:		
Production Type:		otography		<u> </u>	o Photography		
Number of Parking Tags	Applicable to Sunset Beach Parking Permits ONLY:  Tumber of Parking Tags						
Requested:		(May of E T	otal Parking Tags	- 1 Mag	tor 1 1 Additions	J)	
			able to Utility			ш	
Invoice Billing				,	011211		
Information:		Name		/		Address	
				/		/	
		City			State	/	Zip
Utility Type	□Wet	☐ Dry					
7 71	_		dditional Info	ormati	on:		
ADDITIONAL							
INFORMATION:							
				_			
DECLADATION.			DECLARA	ΓΙΟΝ:			
<b>DECLARATION:</b> I declare to the best of my knowledge that the information I have presented on this form and attached materials is true and correct. I also understand that additional data and information may be required prior to final approval of this application and that insufficient information / documents may delay the plan review process.							
A non-refundable filing fee is required at the time of application and will be applied to the balance of any additional fees required by Board Resolution 94-300.  Upon receipt of the above, staff will coordinate the review of your submittal. You will be advised of revisions, additional fees, surety deposits/bond amounts, insurance requirements and other items required to permit issuance.  Upon completion of the permitted use, PERMITTEE is responsible for initiating the refund of surety deposit (if applicable) by calling the assigned Inspector for final sign-off. Refunds are processed within 6-8 weeks after sign-off by the Inspector.							
Please Note: Requests may be mailed to: County Property Permits P.O. Box 4048, Santa Ana, CA. 92702 OR faxed to: (714) 667-8885 Monday thru Friday 7:30 AM to 5:00 PM							
Print Name			Signat	ure			Date
STAFF USE ONLY:							
PCRA:	☐ Yes	☐ No					
APPLICATION COMPLETE - COUNTY PROPERTY PERMI	Γ						
/CUSTOMER CARE STAFF NAME (per related checklis				INI	ITIAL	DATE	
(per related elleckils	·			114)		DATE	

OC PUBLIC WORKS/OC PLANNING |300 N. Flower Street, Santa Ana, CA 92703 | COUNTY PROPERTY PERMIT APPLICATION | PAGE 2