

Official	Use	Only

Date Received
_____Initials

Parks & Recreation Department

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APPLICATION FOR ENCROACHMENT ON CITY PARKS AND BEACHES CONSTRUCTION & SCIENTIFIC RESEARCH

Organization (if appli	icable):				
Applicant Name:					
Address:					-
			State: Zip:		
Day Phone:			Cell Phone:		
Email:					
Proposed Work:					
Coordinator: Name_	T.Y	(OF SANCell: A CR		<u> </u>
Location:		$\int_{-\infty}$	Facility:		
Date(s):		$^{\prime}$			_
Setup Time:	= 1 L		Breakdown Time:		
Work Hours: Start			End		
Project Description:					
Please indicate the following	llowing	:			
Is this project connected an existing City issued permit?	YES	NO	Will equipment be brought on site? (Ex. vehicles, generators, excavators, etc.).	YES	NO
Will this project require temporary or permanent installation of a physical asset/device?	YES	NO	Equipment List (Use additional page if necessary):		
			of perjury that I am the authorized representative of the at the information I supplied here is true and correct to the		
	Applica	nt's Si	gnature Date		