THE CITY OF OAKLAND EXCAVATION PERMIT APPLICATION

PERMIT FEE: \$35.00	DATE:
INSPECTION FEE: \$30.00 EA	
Name of Property Owner:	
Property Owner Address:	
Project Address:	
Property Owner Contact Numbers cell	:: day evening
Contractor's Name:	
Contractor's Street Address/Phone	e:
Start Date:	Finish Date:
Description of Project: Dimensions: (length/width)	Type of Material Used: (concrete/asphalt/other)
Location of Work:	
of proposed driveway.	plan or drawing that designates the structure and exact location please return with check made payable to the <i>City of Oakland</i> ,
P. O. Box 220511, St. Louis, M.	<i>O 63122.</i> Should you have any questions about your project, rator/City Clerk at 314-416-0026. To schedule an inspection,
If your plan requires a dumpster of arrives on location.	or temporary storage pod, a permit will be needed before it
FOR OFFICE USE ONLY: Application Approved:	Denied:
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