

Phone: 949.248.3554 Fax: 949.248.7372

Multiple Use

"Signature on File" Card – City of Dana Point Public Works

I,, (hereafter known as "Requestor") acknowledge I am a		as "Requestor") acknowledge I am an
Authorized Agent Own	er	
		rmission to issue Encroachment Permits on my
behalf when the APPLICANT*	** CONTRACTOR *	* SELF
listed on the signed Encroachment P	Permit Application is :	
		Company or Individual Name
-	Mailing Address	
		_
Requestor (Signature)	Date	Phone No.