



County of San Diego, Planning & Development Services
Self-Certification Permit Application
Minor Traffic Control
BUILDING DIVISION

Date: _____
Street 1 _____ From Street _____ To _____
Community _____ Thomas Brothers Map Page and Grid # _____

Description of Work/Reason for Traffic Control: _____

Start Date: _____ Start Time: _____ a.m./p.m.
End Date: _____ End Time: _____ a.m./p.m.

Roadway Characteristics:

Have you verified this is a County Maintained Road? Yes No

Road Classification on Mobility Element Map _____

Speed Limit _____

of Lanes _____

Roadway Width _____

Centerline Striping Yes No

Bike Lanes Yes No

Sidewalk Yes No

School Zone within ½ mile of work zone Yes No If yes, list school

hours _____

Permit Owner Information

Owner: _____ Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Fax: _____

Email: _____

5510 OVERLAND AVE., SUITE 110, SAN DIEGO, CA 92123 • (858) 565-5920 • (888) 336-7553

[HTTP://WWW.SDCPDS.ORG](http://www.sdcps.org)



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Applicant Information *Check if same as owner*

Name: _____ Company Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone #: _____ Fax: _____
Email: _____

I have designed the project per San Diego Regional Standard Drawing (RSD) TCP-01, TCP-02A, TCP-02B, TCP-03, TCP-04, TCP-05A, and TCP-05B, and the following:

For Driveways:

- TCP-06
- TCP-07A
- TCP-07C

For Sidewalks:

- TCP-52
- Initial _____

General Contractor Information (Required to perform work)

Business Name: _____ Email: _____
Address: _____
City: _____ State: _____ Zip: _____
Contact Person: _____ Phone #: _____ Fax: _____
CA License #: _____

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Land Development Counter Clearance

Encroachment/Excavation/Construction Permit #: _____

ROW Permit Approved Yes No

Contractor's License and Proof of Liability Insurance

Overview Map

Construction Drawing/Standard Drawings

Owner Certification Statement

Hold Harmless Letter

Staff Initials: _____ Date: _____

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