

APPLICATION
DATE
PROJECT NO.

**CITY OF REDONDO BEACH**  
**GRADING/SHORING PERMIT APPLICATION**



COMMUNITY DEVELOPMENT DEPARTMENT, BUILDING DIVISION  
 415 DIAMOND · REDONDO BEACH, CA 90277 · (310) 318-0636 · FAX: (310) 374-4828

PERMIT ADDRESS		STRC. I.D.	FLR	UNIT	ZIP	
DESCRIPTION OF WORK						
					VALUATION	
			MAJOR HWY YES <input type="checkbox"/> NO <input type="checkbox"/>	STATE HWY YES <input type="checkbox"/> NO <input type="checkbox"/>		
APPLICANT	PHONE ( )		TRUCK ROUTE:			
ADDRESS			<b>DESCRIPTION OF WORK</b>			
CITY	STATE	ZIP				
OWNER	PHONE ( )					
ADDRESS						
CITY	STATE	ZIP				
CONTRACTOR	PHONE ( )					
ADDRESS						
CITY	STATE	ZIP				
STATE LICENSE NO.	CITY LICENSE NO.					
ARCHITECT	PHONE ( )					
ADDRESS			<b>APPROVALS</b>			
CITY	STATE	ZIP	STATE LICENSE NO.	BUILDING _____		
ENGINEER			PHONE ( )	POLICE _____		
ADDRESS			PUBLIC WORKS _____			
CITY	STATE	ZIP	STATE LICENSE NO.	CUBIC YARDS FILLED: _____		
OCCUPANT		PHONE ( )		CUBIC YARDS CUT: _____		
PLAN CHECKED	DATE	APPLICATION APPROVED		MAX. DEPTH OF CUT: _____		
CORRECTION VERIFIED BY	DATE	STAFF APPROVED		SHORING REQUIRED: YES <input type="checkbox"/> NO <input type="checkbox"/>		
REMARKS			<b>OTHER METHODS USED:</b>			
			SLOT CUTTING <input type="checkbox"/>		SLOPING BACK <input type="checkbox"/>	
			CUBIC YARDS IMPORTATED: _____			
			CUBIC YARDS EXPORTED: _____			
			SOILS REPORT SUBMITTED YES <input type="checkbox"/> NO <input type="checkbox"/>			
			<b>ENGINEER:</b>			
			NAME: _____			
			ADDRESS: _____			
			LICENSE NO. _____			
			NEAREST DISTANCE OF NEIGHBORING BUILDING TO PROPERTY LINE _____			
DISTANCE FROM PROPERTY LINE TO EXCAVATE EDGE _____						
SIGNATURE		DATE	PLAN CHECK FEE	PERMIT FEE		