CITY OF GLENDALE
ENGINEERING DEPARTMENT
5850 W. Glendale Avenue, Suite #315
Glendale, AZ 85301
623-930-3630

EMAIL FORM ONLY TO:
jflatt@glendaleaz.com
nyslava@glendaleaz.com

CITY OF GLENDALE PERMIT NOTIFICATION FORM

To:	Jon Flatt	From:		(COX / CTL / SWG / APS / SRP / TCA)
		Contact Name:		
Date:		Phone #		
No. of Pages:		Fax #		
		Email:		
		** Emergency (After Hours)		
		Contact Name:		
		Phone #		

Subcontractor Company Name:		
Office Phone #:		
Project Name (from permit):		
On Site Foreman Name:		
Contact Phone #:		
Supervisor Contact 24 hr:		
SupervisorContact 24 hr phone:		
Email:		
FAX #		
COG Permit #:		
Project Address:		
Blanket PO #		
Additional Subcontractor Crew (Name/Ph #):		
City Contact & Phone #:	Jon Flatt 623-980-5130	
Type of Work: (Splice pit/Open cut/etc.)		
Alley, Sidewalk or Pavement Cut (Where)	Yes / No	(circle one)
Excavation Required:	Yes / No	(circle one)
Date of Scheduled Start:		
Date of Scheduled Completion:		
Alley Closure:	Yes / No	(circle one)
Lane / Sidewalk Closure:	Yes / No	(circle one)
Traffic Control Plan submitted:	Yes / No	(circle one)
Pre-Con required (Request Inspector name)	Yes / No	(circle one)
Description / Location of Work:		
Barricade Company Name & Contact:		