



Community Economic Development Department
Land Development Engineering
Standard Application

Permit Number: _____

Please provide all requested information. Incomplete applications will be rejected, resulting in possible delays to your project.

Project Name: JB672166 Application Date: 10/26/22
Site Address / APN: 3999 PELANDALE AVE. Engineer's Estimate: _____

Permit Type:
SIT [] Plan Check [] Maps / Lot Line Adjustment / Easement [] Will Serve / Outside Service Agrmt. []
ENC [X] Standard Encroachment (N) [] Utility Company (U) [] CIP Project Permit (CIP) []
Sewer Cost Share (N) [] Subdivision Permit (S) [] CFD Work Permit (CFD) []
Well / Excavation Intersecting Groundwater (W) [] Grading Permit (G) []
WTS [] Sewer [] Water [] Both []

Applicant: ** The applicant will be considered the primary point for all contact, and correspondence from the City unless other arrangements are made in writing.

Name/Company: Comcast Contact Name: Sunny Thipsidakhom
Address: 3011 Triad Pl City: Livermore State/Zip: CA 94551
Phone: 619-625-6729 e-mail: chc-permitting-6@chcconsulting.com

Owner: Same as applicant: [] ** Corporate partnerships must provide a list of principles.
Name: _____ Phone: _____
Address: _____ City: _____ State/Zip: _____

Contractor / Designer: Same as applicant: []
Name/Company: Sefnco Communications Contact Name: Jeremy Heusler
Address: 12687 South Manthey Rd City: Lantrop State/Zip: CA 95330
Phone: 209-278-8159 e-mail: phheusler@sefnco.com

Contractor License: Insurance on file with LDE?: Y [] N [] If no, please provide complete contact info above.
City of Modesto: 018959006 State / Type: _____

Work / Project Description: This project proposes to overflash approx 193ft. of new cable along 1 existing pole and midspan from CITY R.O.W. Place traffic control signage in MODESTO CITY JURISDICTION for work being performed in STANISLAUS COUNTY JURISDICTION

Site Area SF: _____ Existing Zoning: _____ # Proposed Units: _____
Proposed Zoning (If applicable): _____
Building Area SF: _____ # Proposed Lots: _____
Owner is Contractor (Flatwork Only): Y [] N [] Insurance Waivers attached: Y [] N []
Trenching W / L: _____ Paving W / L : _____
Duration of project?: 1 days Estimated start date: 11/18/2022
Work performed during City Construction
Hours: Y [X] N [] Work / Site Plan Attached: Y [X] N [] Traffic Control Plans Attached: Y [X] N []
Is this a Boring Project? Y [] N [] Quantity _____ Size _____
Where is it located? Check all that apply. Horizontal [] Across [] Street [] Dirt [] PUE [] Sidewalk [] New Vault []
Bill Inspections To: Applicant [X] Owner [] Contractor [] Designer/Consultant []

Deposit type applications may either have a refund due or additional fees due after the Final Inspection and/or before Recordation can occur. You must provide the contact information to receive a refund. NO REFUNDS WILL BE GIVEN FOR BALANCES LESS THAN \$5.00
Deposit Refunds Applicant [] Owner [] Contractor [] Designer/Consultant []

Additional notes / comments: _____

AFFIDAVIT

If the owner is a trust, partnership, LLC, the signature shall be a corporate officer. Attach additional sheets if necessary.
I hereby certify that I am the applicant in the foregoing application, that I have read the foregoing application and know the content thereof and state that the
Sunny Thipsidakhom
Applicant (Signature)
Sunny Thipsidakhom
Applicant (Print Name)
I declare that I am the owner of the herein described property and that I have familiarized myself with this completed application and give consent to the action
Owner (Signature)
Owner (Print Name)