STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

ENCROACHMENT PERMIT FEE CALCULATION SHEET

TR-0406 (NEW 03/2015)

PERMIT NO.

WORK ORDER/REFERENCE NUMBER

THIS PAGE IS FOR CALTRANS USE ONLY

☐ DEFERRED BILLING (Utility) ☐ EXEMPT ☐ PROJECT CODE (ID) _____

FEES

1.

REVIEW ..... _____ hours @ $ 82.00 / hour = $_____

INSPECTION ..... _____ hours @ $ 82.00 / hour = $_____

FIELD WORK ..... _____ hours @ $ 82.00 / hour = $_____

EQUIPMENT AND MATERIALS ..... $_____

CALCULATED BY: _____ DATE: _____ **AMOUNT: $**_____

2.

REVIEW ..... _____ hours @ $ 82.00 / hour = $_____

INSPECTION ..... _____ hours @ $ 82.00 / hour = $_____

FIELD WORK ..... _____ hours @ $ 82.00 / hour = $_____

EQUIPMENT AND MATERIALS ..... $_____

CALCULATED BY: _____ DATE: _____ **AMOUNT: $**_____

3.

REVIEW ..... _____ hours @ $ 82.00 / hour = $_____

INSPECTION ..... _____ hours @ $ 82.00 / hour = $_____

FIELD WORK ..... _____ hours @ $ 82.00 / hour = $_____

EQUIPMENT AND MATERIALS ..... $_____

CALCULATED BY: _____ DATE: _____ **AMOUNT: $**_____

4.

REVIEW ..... _____ hours @ $ 82.00 / hour = $_____

INSPECTION ..... _____ hours @ $ 82.00 / hour = $_____

FIELD WORK ..... _____ hours @ $ 82.00 / hour = $_____

EQUIPMENT AND MATERIALS ..... $_____

CALCULATED BY: _____ DATE: _____ **AMOUNT: $**_____

TOTAL FEES: $_____

DEPOSITS

1. ☐ CHECK NUMBER _____ NAME ON CARD/CHECK _____

☐ CREDIT CARD PHONE NUMBER _____

☐ CASH CASHIER'S INITITALS _____ DATE: _____ **AMOUNT: $**_____

2. ☐ CHECK NUMBER _____ NAME ON CARD/CHECK _____

☐ CREDIT CARD PHONE NUMBER _____

☐ CASH CASHIER'S INITITALS _____ DATE: _____ **AMOUNT: $**_____

3. ☐ CHECK NUMBER _____ NAME ON CARD/CHECK _____

☐ CREDIT CARD PHONE NUMBER _____

☐ CASH CASHIER'S INITITALS _____ DATE: _____ **AMOUNT: $**_____

4. ☐ CHECK NUMBER _____ NAME ON CARD/CHECK _____

☐ CREDIT CARD PHONE NUMBER _____

☐ CASH CASHIER'S INITITALS _____ DATE: _____ **AMOUNT: $**_____

TOTAL DEPOSITS: $_____

CASH DEPOSIT IN LIEU OF BOND	☐	DATE	AMOUNT $
PERFORMANCE BOND	☐	DATE	AMOUNT $
PAYMENT BOND	☐	DATE	AMOUNT $
IS LIABILITY INSURANCE REQUIRED?	☐ YES ☐ NO		AMOUNT $

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