



CITY OF OCEANSIDE
DEVELOPMENT SERVICES DEPT.
CAPITAL IMPROVEMENT PROGRAM (CIP)

PUBLIC REQUEST FOR NEW PROJECTS
- BUDGET YEARS 2019-2023

REQUEST DATE: _____

PROJECT LOCATION: _____

PROJECT DESCRIPTION: _____

REQUESTED BY: _____

Tel: _____

E-Mail: _____

(City of Oceanside does not require personal contact information to consider a new project request, and the information will only be used by City staff to contact you if we have a question and to acknowledge that we have received your request.)

RETURN FORM TO:

By postal mail: CITY OF OCEANSIDE,
DEVELOPMENT SERVICES DEPT,
300 NORTH COAST HIGHWAY
OCEANSIDE, CA 92054

Attn: City of Oceanside CIP

By e-mail: EngCIPVM@oceansideca.org