

# CITY OF SOLANA BEACH

## ENCROACHMENT PERMIT

**FOR OFFICE USE ONLY**

**Applicant to complete all information except in dashed boxes** (Please type or print legibly)

**PERMIT NO.** \_\_\_\_\_  
**Date of Permit** \_\_\_\_\_  
**Expiration of Permit** \_\_\_\_\_  
**Fee Paid \$** \_\_\_\_\_  
**Receipt #** \_\_\_\_\_  
**Permit Issued By:** \_\_\_\_\_

- [1] APPLICATION FOR:**
- |   |  |
|---|--|
| <input type="checkbox"/> CURB/SIDEWALK/DRIVEWAY | <input type="checkbox"/> WALL/FENCE            |
| <input type="checkbox"/> TEMP. STORAGE/DUMPSTER | <input type="checkbox"/> UNDERGROUND UTILITIES |
| <input type="checkbox"/> STREET EXCAVATION      | <input type="checkbox"/> SEWER CONNECTION      |
|   | <input type="checkbox"/> OTHER: _____          |

**[2] ADDRESS OF WORK:**

- [3] APPLICANT IS (Check One)**       Owner       Contractor       Engineer       Other:

<b>[4] OWNER'S NAME:</b>	ADDRESS:	PHONE:
		FAX:

<b>[5] CONTRACTOR'S NAME:</b>	ADDRESS:	PHONE:
		FAX:

<b>[6] ENGINEER'S/OTHER NAME:</b>	ADDRESS:	PHONE:
		FAX:

**[7] CONTRACTOR'S CITY BUSINESS CERTIFICATE NO:** \_\_\_\_\_ **STATE LICENSE NO:** \_\_\_\_\_

**[8] CONTRACTOR LICENSE EXEMPTION**

I am the OWNER of the property and am personally performing all work within the public Right-of-Way. I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation laws of California. If, after signing this certificate, I become subject to the Workers' Compensation provisions of the State Labor Code, I must comply with the provisions of Section 3700, or this permit shall be deemed revoked.

**Sign below:**

Date: \_\_\_\_\_ Owner: \_\_\_\_\_

**[9] APPLICANT HEREBY MAKES APPLICATION TO: (DESCRIBE PROJECT AND ATTACH PLANS IF APPLICABLE)**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**[10] SPECIAL CONDITIONS OF APPROVAL REQUIRED BY CITY:**

\_\_\_\_\_  
 \_\_\_\_\_

CITY STANDARD CONDITIONS ARE HEREBY INCORPORATED INTO THIS PERMIT - SEE ATTACHMENT A

**[11] A CERTIFICATE OF INSURANCE ENDORSED TO SHOW THE CITY OF SOLANA BEACH AS AN ADDITIONAL INSURED**

Liability Insurance       Required and copy attached      Amt. \_\_\_\_\_       Not Required

Policy No.: \_\_\_\_\_ Company: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Worker's Compensation       Required and copy attached      Amt. \_\_\_\_\_       Not Required

Policy No.: \_\_\_\_\_ Company: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**[12] HOLD HARMLESS**

I understand that I am locating minor encroachments within the City right-of-way/easement. It is my responsibility as the property owner to maintain the encroachments. I will be responsible for replacing the improvements if the City removes them for maintenance of utilities or other public need; and I, the property owner shall indemnify and hold the City harmless of any liability associated with the minor encroachments.

Date: \_\_\_\_\_ Owner Signature: \_\_\_\_\_

**[13] 48 HOUR ADVANCE NOTICE IS REQUIRED FOR ALL INSPECTIONS - CALL (858) 720-2470  
 ALL UNDERGROUND WORK SHALL BE PERFORMED BY A CONTRACTOR WITH A VALID LICENSE.  
 CALL "UNDERGROUND SERVICE ALERT" AT LEAST 48 HOURS IN ADVANCE OF ANY EXCAVATION AT (800) 227-2600**

**[14] NO TREES WITHIN THE CITY RIGHT-OF-WAY SHALL BE PLANTED, REMOVED OR RELOCATED WITH CITY APPROVAL.**

**[15] Traffic Control Plan:**       Required and copy attached       Not Required

**[16] The permit instructions, terms and conditions are specified on both sides of this form. Applicant hereby acknowledges that he/she has read and understands said terms and conditions and the he/she agrees to abide by them.**

\_\_\_\_\_  
**OWNER'S OR AUTHORIZED AGENT'S SIGNATURE**

\_\_\_\_\_  
**DATE**