



County of Santa Barbara  
 Department of Public Works, Road Division Permit Office  
 4417 Cathedral Oaks Road 620 West Foster Road  
 Santa Barbara, CA 93110 Santa Maria CA 93455

# Road Encroachment Permit Application

Permit No. \_\_\_\_\_

DISCRETIONARY PROJECT: Y/N (If yes, provide copy of Cond of Approval) \_\_\_\_\_ APN: \_\_\_\_\_

ENCROACHMENT ADDRESS: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

DESCRIPTION OF WORK: \_\_\_\_\_

### OWNERS INFORMATION

Name: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ (Cell) \_\_\_\_\_ (Fax) \_\_\_\_\_

\*Plans must be submitted with application.

### Applicant Information

Authorized Agent [ ] (fill out Authorization Signature below if checked)

Check one: CONTRACTOR [ ] ARCHITECT [ ] ENGINEER [ ]

Company Name: \_\_\_\_\_ Representative \_\_\_\_\_

Telephone: \_\_\_\_\_ (Cell) \_\_\_\_\_ E-mail \_\_\_\_\_

Address: \_\_\_\_\_ State License \_\_\_\_\_

Worker's Comp. Insurer: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Check one: CONTRACTOR [ ] ARCHITECT [ ] ENGINEER [ ]

Company Name: \_\_\_\_\_

Company Representative: \_\_\_\_\_ Registration No.: \_\_\_\_\_

Telephone: \_\_\_\_\_ (Cell) \_\_\_\_\_ E-mail \_\_\_\_\_

Address: \_\_\_\_\_

Worker's Comp. Insurer: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

### Authorization Signature ( complete authorization section only if Authorized Agent box above is checked )

I/We \_\_\_\_\_ authorize and give consent to \_\_\_\_\_ to act as  
 (Print Owner Name) (Print Agent Name)

my/our authorized agent to apply for, sign, and receive in my/our behalf, a Road Division Encroachment/Excavation Permit. I/we understand that as the legal property owner where the encroachment/excavation is to take place, that I/we are responsible and liable for all actions, costs, and liabilities associated with this Encroachment/Excavation Permit.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### Owner/Agent Signature ( \*required to be filled out by owner or agent )

I \_\_\_\_\_ hereby make application to excavate and/or encroach in the Public Road/  
 (Print Name)

Right-of-Way at the location(s) and as described herein, subject to the provisions required by Ordinance No. 1491, of Santa Barbara County, applicable State or Federal Regulations, AND ANY SPECIFIED REQUIREMENTS ATTACHED HERETO.

It is agreed by the owner and applicant that the County of Santa Barbara and any officer or employee thereof shall be saved harmless by the applicant from any liability or responsibility for any accident, loss or damage to persons or property, happening or occurring as the proximate result of any of the work undertaken under the terms of this application and the permit or permits which may be granted in response thereto, and that all of said liabilities are hereby assumed by the owner or applicant.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_