



City of Del Mar
 Department of Planning and Community Development
 1050 Camino del Mar
 Del Mar, CA 92014

Phone: 858-755-9313 Fax: 858-755-2794
 Hours: M-TH 1:00 pm – 5:30 pm
 FRI 1:00 pm – 4:30 pm
www.delmar.ca.us

EP - _____ - _____ **Short Term** **Long Term** / **Major** **Minor**

Submittal Date: _____ Planner: _____

Fees: PL: _____ ENG: _____ GPF: _____ Traffic: _____ Noticing: _____
 Inspection Fee: _____ Security Deposit: _____

Receipt No.: _____

Related Projects: _____ Improvement Drawing No.: _____

Encroachment Permit Application

Application(s) must be submitted at least twenty (20) working days prior to proposed dates of work

| | |
|---|-----------------|
| APPLICATION: | |
| Project Location / Address: | |
| Public right-of-way location/area: | |
| Assessor's Parcel No(s). | |
| Zoning: | Overlay Zone(s) |
| Date(s) of work: | Time of Work: |
| APPLICANT: | |
| Applicant(s): | |
| Mailing Address: | |
| City / State: | Zip: |
| Phone No(s): | |
| Email: | |
| Signature(s): | |
| OWNER (if not primary applicant) above: | |
| Owner: | |
| Mailing Address: | |
| City / State: | Zip: |
| Phone No(s): | |
| Email: | |
| Signature(s) | |
| <small>(authorizing applicant to submit application):</small> | |
| APPLICANT'S CONTRACTOR (if applicable): | |
| Applicant's Contractor: | |
| Mailing Address: | |
| City / State: | Zip: |
| Phone No(s): | |
| Email: | |
| LICENSES REQUIRED: | |
| Contractor's License No.: _____ | |
| <input type="checkbox"/> Insurance Certificate (must be attached) | |
| City of Del Mar Business License No.: _____ | |
| <small>(Separate Business License for each subcontractor)</small> | |

Date: _____

Application Number(s): _____
Site Address: _____

I, the undersigned owner (or authorized agent) of the property herein described, hereby make application for approval of the plans submitted and made a part of this application in accordance with the provisions of the City of Del Mar Ordinances, and I hereby certify that the information given is true and correct to the best of my knowledge and belief.

I understand that the requested approval is for my benefit (or that of my principal). Therefore, if the City of Del Mar grants the approval, with or without conditions, and that action is challenged by a third party, I will be responsible for defending against this challenge. I therefore agree to accept this responsibility for defense at the request of the City and also agree to defend, indemnify and hold the City of Del Mar harmless from any costs, claims or liabilities arising from the approval, including, without limitation, any award of attorney's fees that might result from the third party challenge.

Signature: _____ Date: _____
(if other than owner, must have letter from owner)

Signature: _____ Date: _____
(if other than owner, must have letter from owner)

PROPOSED ENCROACHMENT(S):

Describe the purpose, extent and nature of the proposed work, including any structures or other improvements to be located or constructed with a right-of-way and any proposals for storage of materials or other activities to occur within a right-of-way. List each aspect of the proposed project. Aspects not listed may not be considered authorized as part of an approved permit.

(A detailed plan showing the location of the right-of-way and a layout of the proposed construction or activity is also required as an attachment):

Blank area for providing details of the proposed encroachment(s) and the required detailed plan.

GRADING/TRENCHING (As applicable):

Is any grading or earth movement proposed within a right-of-way? Yes No

If any grading is proposed within a right-of-way, the following information is required:

| | |
|-------------------------------|--|
| Number of Cubic Yards: | |
| Maximum depth of cut or fill: | |
| Proposed Street Haul Route: | |

HOUSE MOVING (as applicable):

| | | |
|--------------------------|--------|---------|
| Dimensions of Structure: | | |
| Height: | Width: | Length: |
| Proposed Street Route: | | |

AFFECTED UTILITIES:

| | | |
|---|-----------|--|
| <input type="checkbox"/> Water | Provider: | |
| Between hours of: | | |
| How effected / modified: | | |
| <input type="checkbox"/> Sewer | Provider: | |
| Between hours of: | | |
| How effected / modified: | | |
| <input type="checkbox"/> Electricity | Provider: | |
| Between hours of: | | |
| How effected / modified: | | |
| <input type="checkbox"/> Cable | Provider: | |
| Between hours of: | | |
| How effected / modified: | | |
| <input type="checkbox"/> Other | Provider: | |
| Between hours of: | | |
| How effected / modified: | | |

RECOMMENDED ACTION FORM CITY DEPARTMENTS

A recommendation for denial of the application should be accompanied by a written statement as to how the application would fail to meet the applicable standards of review of DMMC Chapter 23.28.

| | | |
|---|---|---|
| | <input type="checkbox"/> Approved with Conditions <small>(see routing sheet)</small> | <input type="checkbox"/> Denied <small>(attach reasons)</small> |
| Public Works Director | Date | |
| | <input type="checkbox"/> Approved with Conditions <small>(see routing sheet)</small> | <input type="checkbox"/> Denied <small>(attach reasons)</small> |
| Planning & Community Development Director | Date | |
| | <input type="checkbox"/> Approved with Conditions <small>(see routing sheet)</small> | <input type="checkbox"/> Denied <small>(attach reasons)</small> |
| City Engineer | Date | |
| | <input type="checkbox"/> Approved with Conditions <small>(see routing sheet)</small> | <input type="checkbox"/> Denied <small>(attach reasons)</small> |
| Fire Chief | Date | |
| | <input type="checkbox"/> Approved with Conditions <small>(see routing sheet)</small> | <input type="checkbox"/> Denied <small>(attach reasons)</small> |
| Finance Director (deposit received) | Date | |
| | <input type="checkbox"/> Approved with Conditions <small>(see routing sheet)</small> | <input type="checkbox"/> Denied <small>(attach reasons)</small> |
| Action by the City Manager (or recommendation to City Council as applicable) | Date | |

CONDITIONS OF APPROVAL (found on conditional approval letter)

The applicant, representatives and contractor should read all of the conditions carefully before work begins.

Failure to comply with the conditions of approval could result in the issuance of fines and the possible revocation of the Permit.

Signature: _____
(of applicant, representative or contractor)

CHECK OFF LIST FOR ENCROACHMENT PERMITS

All questions and all plans should be attached to application. Also, all other planned work within Right of Way along with property survey indicating location with the property line located to the edge of street.

Driveway construction:

- Contractor name and license number
- Contractor insurance certificate with Del Mar named as co insured (Please attach paper work to EP)
- What is the cross section of apron to be constructed at street?
- Where are planned expansion joints?
- Are you altering or adding curbs?
- Please indicate the existing edge of pavement and the planned edge of new driveway apron.
- Provide planned excavation at street interface and advise: Will edge of street be saw cut?
- Is street drainage being altered?
- Do you plan to have utilities notified before excavation?
- What traffic controls are planned during construction?
- Will an open cut adjacent to road be left open at night, if so what are planned controls for safety?
- Is this part of an earlier approved application?
- Who is primary contact 24 hrs a day, if problems arise?

Utility Construction:

- Contractor name and license number
- Contractor insurance certificate with Del Mar named as co insured
- Have you paid fees to Finance Department for connection services including capacity fees? (Please attach paper work to EP)
- If sewer: Do you plan to install a backflow prevention device?
- Is lowest level open in structure above the highest street manhole on connecting line by at least 1 foot?
- If water line: Do you have a backflow device?
- Have you noticed Finance of plans to install backflow device?
- Are you aware of backflow device certification requirements?
- Describe by attaching regional standards proposed utility construction installation. (Example sewer pipe specs and construction details)
- Describe by attaching regional standards planned trench construction.
- Describe planned compaction of trench and who will perform compaction testing.
- What traffic controls are planned during construction?
- Will an open cut adjacent to road be left open at night, if so what are planned controls for safety?
- Is this part of an earlier approved application?
- Is street drainage being altered?
- Do you plan to have utilities notified before excavation?
- Who is primary contact 24 hrs a day, if problems arise?

Landscape Plantings:

- Contractor name and license number
- Contractor insurance certificate with Del Mar named as co insured
- Are plants taller at maturity over 30 inches?
- Will plantings affect sight distance for approaching Vehicles?
- Have you attached an irrigation plan?
- Do you have a backflow device?
- Have you noticed Finance of plans to install backflow device?
- Are you aware of backflow device certification requirements?
- What traffic controls are planned during construction?
- Will an open cut adjacent to road be left open at night, if so what are planned controls for safety?
- Is this part of an earlier approved application?
- Is street drainage being altered?
- Do you plan to have utilities notified before excavation?
- Who is primary contact 24 hrs a day, if problems arise?