

ENCROACHMENT PERMIT

County of Butte Department of Public Works

7 County Center Drive Oroville, CA 95965

Phone: (530) 538-7681 Fax: (530) 645-1822

All information except signature must be typed or legibly printed

Permit #:

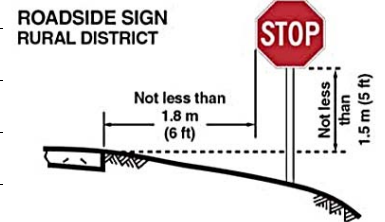
NOTIFY COUNTY 24 HOURS BEFORE WORK IS TO BE STARTED

PROPERTY OWNER	Assessor's Parcel Number (Required):	Property Owner's Name:
	Phone:	Property Address:
	Mailing Address (If Different):	

WORK PERFORMED BY	Work will be performed by: <input type="checkbox"/> Contractor <input type="checkbox"/> Property Owner	Contractor's Name:
	Phone:	Address:
	Fax:	
	Contractor's License Number:	Certificate of Insurance currently on file with Department? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Applicant is: <input type="checkbox"/> Property Owner <input type="checkbox"/> Property Owner's Agent <input type="checkbox"/> Contractor <input type="checkbox"/> Other: _____	
	I / WE, the undersigned, hereby apply to the County of Butte for an encroachment permit to do the following work under or over the County roads and highways, all in accordance with County ordinances and general laws.	
Signature: _____		Date Signed: _____

LOCATION	Road affected:
	Time and Duration of Encroachment: <input type="checkbox"/> Permanent Encroachment <input type="checkbox"/> Temporary: From _____ To _____
	Type of Encroachment: <input type="checkbox"/> Driveway <input type="checkbox"/> Roadway <input type="checkbox"/> Culvert <input type="checkbox"/> Fence <input type="checkbox"/> Pipe/Pipeline <input type="checkbox"/> Sign/Billboard <input type="checkbox"/> Other _____
	Site Plans Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No

PERMIT CONDITIONS (To be filled in by County)	PERMIT IS: <input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED	
	Conditions: In compliance with the above request, and subject to all terms, conditions (including those on page 2 of this permit form) and special conditions written below, permission is hereby granted.	
	1. <input type="checkbox"/> Underground Service Alert (U.S.A.) must be notified two working days prior to any excavation. 800-227-2600	
	2. <input type="checkbox"/> All work shall conform to accompanying: <input type="checkbox"/> Detail <input type="checkbox"/> Plans <input type="checkbox"/> Special Conditions	
	3. <input type="checkbox"/> Other Conditions: SIGNS SHALL BE MAINTAINED BY:	
	FAILURE TO MAINTAIN SIGNS MAY RESULT IN REMOVAL OF SIGNS AT OWNERS	
	EXPENSE. ALL POSTS IN COUNTY RIGHT OF WAY MUST BE BREAK-AWAY POSTS	
	6' MINIMUM FROM EDGE OF PAVEMENT. 5' MINIMUM TO BOTTOM OF SIGN. NO	
	WOOD POSTS IN COUNTY RIGHT OF WAY	
	SIGNS SHALL BE PALCED AS DISCUSSED WITH MARK JONES	
Date Issued:	Expiration Date: N/A	Surety: _____
Date Paid: _____	Amount Paid: EXEMPT	Paid By: _____
Mike Crump, Director of Public Works		By: _____



For County Use Only	Road District:	Inspected By:	Inspection Results: <input type="checkbox"/> Completed - OK <input type="checkbox"/> Completed - Not OK
	Comments:		<input type="checkbox"/> Additional Comments Attached

Note: If permits are faxed to any number besides (530) 645-1822, they can be delayed up to one week.

Form: 200506EP

**Neighborhood Watch Sign Installation
WAIVER OF LIABILITY**

In consideration of being allowed to participate in the Installation of neighborhood watch signs, the undersigned hereby assumes any and all risk of injury, damage or loss, either to the undersigned's person or property, from all and every cause, including both affirmative and passive acts of negligence, violation of law, or willful misconduct on the part of the person who obtained the encroachment permit to install neighborhood watch signs, myself, other participants, members of the public, or the County of Butte, its officers, employees, or agents, during such sign installation, as an incident thereto, or in connection therewith.

It is the understanding between the undersigned and the County of Butte that neither the County of Butte, nor its Public Works Department, nor any of its officers, employees, or agents, shall incur liability or obligation to the undersigned, his/her heirs, successors or assigns. Neither the County of Butte nor its Public Works Department makes any promises, guarantees, or warranties nor enters into any obligation to undertake any action on behalf of the undersigned other than to permit him/her to participate in the installation of neighborhood watch signs pertaining thereto.

I agree to indemnify, defend and save harmless the County of Butte, its Public Works Department, and its officers, employees and agents, from any and all claims, suits or actions of every name, kind and description, brought for, or on account of, injuries to, or death of, any person or damage to property resulting from my performance of any work during such sign installation, as an incident thereto, or in connection therewith.

In the event any provision of this Waiver of Liability Agreement is declared null and void by any court of law, the remainder of the provisions of the agreement shall remain in full force and effect.

I acknowledge that I have read the above Waiver of Liability Agreement, that I understand it, and that I am voluntarily signing it.

_____	_____	_____
Print Name	Signed	Date
_____	_____	_____
Print Name	Signed	Date
_____	_____	_____
Print Name	Signed	Date
_____	_____	_____
Print Name	Signed	Date
_____	_____	_____
Print Name	Signed	Date
_____	_____	_____
Print Name	Signed	Date
_____	_____	_____
Print Name	Signed	Date
_____	_____	_____
Print Name	Signed	Date
_____	_____	_____
Print Name	Signed	Date

Agreement Number: _____

USE ADDITIONAL FORMS AS NEEDED