CITY OF SEBASTOPOL



Engineering Division

714 Johnson Street Sebastopol, CA 95472 Phone: 707-823-2151

none: 707-823-2151 Fax: 707-823-4721

Email: engineering@cityofsebastopol.org

ENCROACHMENT PERMIT APPLICATION SUBMITTAL REQUIREMENTS

PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED

Please allow two weeks for processing.

Completed, signed Encroachment Permit Application Form
• Application form must contain a complete and accurate description of all work to be performed, location, portion of right of way, etc. <u>Attach drawings and plans as needed</u> .
 If you will be performing Traffic Control, please provide a Traffic Control Plan.
• All contractors or subcontractors performing work under the permit must be listed and are required to be licensed with the City and have their own insurance certificates.
Plan Check or Inspection Deposit (if applicable)
City Business License

□ Indemnity Agreement and Insurance Documents (see attached)
 □ Application Fee
 □ Copy of Approved Caltrans Encroachment Permit (specific locations ONLY, as specified below)

For most projects located on State Highways 116 and 12 within Sebastopol, a separate permit from Caltrans is required <u>prior to approval of the City permit</u>. This applies to the following streets:

Gravenstein Highway South
 Gravenstein Highway North
 Petaluma Avenue
 McKinley Street
 Healdsburg Avenue
 North Main Street
 South Main Street
 Sebastopol Avenue

The City is authorized to issue certain minor permits on behalf of Caltrans. Check with the Engineering Division to determine whether your project qualifies for a City-issued Minor Permit on State Highways. For further information about Caltrans Encroachment Permits, please contact:

Caltrans District 4, Office of Local Permits in Santa Rosa, 707-576-2857.

- No work may be performed prior to signature approval of your City permit. The City also requires 24-hour minimum advance notice prior to work.
- Additional information regarding inspection procedures and standard conditions of encroachment permits are included as a part of the permit conditions.
- No insurance submittals will be reviewed until a completed application form has been submitted along with the required fees.
- Questions may be directed to the Engineering Division by phone, fax, or email.

Phone: 707-823-2151 Fax: 707-823-4721

Email: engineering@cityofsebastopol.org



CITY OF SEBASTOPOL

Engineering Division

714 Johnson Street Sebastopol, CA 95472 Phone: 707-823-2151

Fax: 707-823-4721 Email: engineering@cityofsebastopol.org

ENCROACHMENT PERMIT APPLICATION

ENCROACHMENT PERMIT NUMBER:

The undersigned hereby applies for permission to excavate, construct and/or otherwise encroach on the City of Sebastopol right of way by performing the following work. Applicant agrees to perform all work in accordance with City of Sebastopol standards, rules and regulations as outlined in the general conditions attached hereto or any other special conditions required by the City in granting this permit. All contractors and subcontractors who will perform work on the project must possess all applicable licenses, must comply with all City insurance requirements, and must pay the applicable encroachment permit fees prior to approval of this permit. **No work may occur in advance of approval of the encroachment permit.**

PROJECT DESCRIPTION **Street Address: Portion of Right of Way: Description of Work to be Performed:** (Provide a complete description and attach additional sheets, plans or sketches as needed.) Estimated Start of Work Date: **CONTRACTOR (APPLICANT)** Business Name: _____ Contact Name: Street Address: _____ Contractor Lic. #: _____ City, State, Zip: Phone Number: Email Address: Fax Number: Signature: Date: Note: List any additional contractors or subcontractors who will be working under this permit on page 2. WORK BEING PERFORMED FOR PROPERTY OWNER OR AGENT (IF OTHER THAN APPLICANT) Business Name: **Contact Name:** Street Address: _____ Phone Number: City, State, Zip: Email Address: Fax Number: Date: Signature: Note: A building permit may be required. Contact the Building Department at 707-823-8597. FOR OFFICE USE ONLY ☐ City Business Lic. (Expires): ☐ Insurance Submittals Approved: ____ Expires: _____CGL AUTO W/C ☐ Permit Fee: Paid Date: Receipt #: ☐ Inspection Deposit: Approved: Expires: ☐ State Encroachment Permit #: ☐ Engineering Job File #: **APPROVED:** DATE:

Revised 03/20/2023

Permit expires 6 months from date of approval or

on expiration of insurance, whichever occurs first.



CITY OF SEBASTOPOL

Engineering Division

714 Johnson Street Sebastopol, CA 95472 Phone: 707-823-2151 Fax: 707-823-4721

Email: engineering@cityofsebastopol.org

ENCROACHMENT PERMIT APPLICATION ADDITIONAL CONTRACTOR / SUBCONTRACTOR INFORMATION

Please list all additional contractors or subcontractors who will be working under this permit. Each must be properly licensed, licensed with the City of Sebastopol, and must comply with all City of Sebastopol insurance requirements. An additional processing fee is charged for each listed contractor or subcontractor.

Name: City, State, Zip: Email Address:			Address:				
Class:			Expires: _				
By:		_Expires:	CGL	AUTO	W/C		
	A J J J J J J J J J J						
	Phone:						
	Fax:						
Class:			Expires: _				
By:		Expires:	CGL	AUTO	W/C		
	Address	<u> </u>					
	Phone:						
	Fax:						
Class:			Expires:				
By:		Expires:	CGL	AUTO	W/C		
	Class:	Phone: Fax:	Phone:	Phone:	Phone:		



CITY OF SEBASTOPOL ENCROACHMENT PERMIT

PERMIT NUMBER:
ISSUED TO:
PERFORMING WORK FOR:
LOCATION:
DATE APPROVED:

STANDARD CONDITIONS OF APPROVAL

THESE CONDITIONS ARE ATTACHED TO AND FORM A PART OF THIS PERMIT; ANY WORK PERFORMED IN VIOLATION OF THESE CONDITIONS OR OTHER APPLICABLE CITY REGULATIONS MAY RESULT IN A STOP WORK ORDER OR REVOCATION OF THIS PERMIT.

- 1. All work shall conform to City of Sebastopol standards.
- 2. CHANGES IN APPROVED WORK: Any deviation from or addition to the scope of work covered by this permit shall be approved in writing, in advance of work, by the Engineering Manager or City Engineer.
- 3. BEFORE ANY EXCAVATION: Call Underground Service Alert (USA) 811 or 1-800-227-2600.
- 4. INSPECTION REQUESTS: It is your responsibility as the Contractor working under a permit issued by the City, to notify the City in advance of all required inspections of improvements constructed under permits from the Engineering/Public Works Department.
 - a. All requests for inspection are to be directed to the City of Sebastopol Engineering Division at phone number 707-823-2151.
 - b. Please do not call the inspector directly to arrange inspections.
 - c. We require 24-hour advance notice for most inspections and work to be started.

NOTE: BUSINESS HOURS ARE MONDAY THROUGH THURSDAY, 7:00 AM - 5:30 PM. WE ARE CLOSED FRIDAY-SUNDAY AND ON HOLIDAYS. Please be aware of our days of operation and schedule your work accordingly.

- 5. INSPECTION REQUESTS OUTSIDE OF BUSINESS HOURS: Under certain circumstances, the City may arrange for inspection outside our regular business hours. In such a case, there may be additional charges for overtime callouts by our staff. All such extra charges must be approved in advance by the applicant before the inspection may be scheduled.
- 6. TRAFFIC CONTROL NOTIFICATION: If your work requires traffic control or blocking of streets, parking, or sidewalk areas, please provide 48-hour advance notice to the City of Sebastopol Engineering Division.
- 7. SHUTDOWN OF WATER MAINS NOTIFICATION: When your work will require shutdown of water mains, the City requires you to provide a minimum of 48-hour advance notice, in writing, to all affected customers. This means you should make arrangements with City staff at least <u>four (4) working days</u> in advance of planned shutdowns.
- 8. FAILURE TO ARRANGE FOR INSPECTION: Any work which is done without benefit of a required inspection by the City is done at your own risk, and you may be asked to remove and re-construct the improvements if they are not found to be in accord with approved plans or City standards during an "after the fact" inspection.

- 9. CALTRANS INSPECTION ON STATE HIGHWAYS: Inspection by Caltrans personnel is required for some work within State Highway rights of way in Sebastopol. However, a Caltrans inspection does not supersede or substitute for a City inspection.
- 10. Please assist us to serve you by observing these reminders.
 - a. Notification shall include location and dates of work to be performed.
 - b. This permit is for work within City right of way only and does not constitute permission for work to be performed within State Highway right of way (State Routes 116 and 12). Contractor shall obtain an Encroachment Permit from Caltrans prior to performing any work in State Highway right of way.
- 11. Contractor is responsible for controlling all mud, dust, dirt, and debris at all times during construction.
- 12. Contractor shall not obstruct traffic or pedestrian walkways with vehicles or equipment during construction.
- 13. Contractor shall provide adequate traffic control at all times, to the satisfaction of the Public Works Superintendent.
- 14. Public Works staff time for processing of permits, utility location, and construction supervision and inspection (as required) will be posted against your inspection deposit account. City will bill any staff time charges exceeding this amount to the permit holder as they occur.
- 15. This permit shall expire six (6) months from the date of issuance or on expiration of any required insurance policy endorsement, whichever occurs first. It is the applicant's responsibility to provide insurance renewals in a timely manner to keep the permit in effect. A new application fee will apply any time the City must renew a permit which has been allowed to lapse.

SPECIAL CONDITIONS:				



DATE

INSPECTOR

CITY OF SEBASTOPOL ENCROACHMENT PERMIT FINAL INSPECTION

A FINAL INSPECTION AND ACCEPTANCE OF WORK BY THE CITY IS REQUIRED TO VALIDATE THIS PERMIT.

If final inspection and approvals are not obtained, the encroachment permit will expire by limitation, and the applicant may be subject to enforcement action, including additional permit fees, citation, and/or a nuisance abatement hearing before the City Council.

The permittee shall contact the Engineering Division to arrange for a final inspection and acceptance of work by the City **prior to the date of expiration**. **A minimum of 24-hour advance notice is required** for all Public Works/Engineering inspections. Projects requiring final inspection and approval by the City Engineer may take several business days to schedule.

INSPECTION RECORD

COMMENTS

-		1	
	FINA	AL INSPECTION / ACCEPTA	ANCE
conformance	with the applicable City Standa		and found all work to be completed in Standard Plans and Specifications, and/or astopol Engineering Division.
Ву:			Date:
Reviewed:			Date:
Distribution:	Encroachment Permit File #: Engineering File #: Sebastopol Building Department City Engineer		

OF TORM OF THE PRINT OF THE PRI

CITY OF SEBASTOPOL

Engineering Division

714 Johnson Street Sebastopol, CA 95472 Phone: 707-823-2151

Fax: 707-823-4721

Email: engineering@cityofsebastopol.org

INSURANCE REQUIREMENTS FOR ENCROACHMENT PERMITS

The attached insurance requirements apply to all contractors performing work under an Encroachment Permit within or upon any public right of way, street, sidewalk, easement or City-owned property in the City of Sebastopol.

Please allow plenty of time for processing your permit and insurance prior to beginning work. Processing insurance submittals for approval may take several days, or even weeks, depending on the completeness of submittals and the cooperation of insurance providers.

The attached Indemnity Agreement is required with your permit application and insurance submittal. It states that for purposes of insurance endorsements, the City considers the Encroachment Permit to be an Insured Contract and Written Agreement to provide the coverages and amendatory endorsements described in this package. By signing this application, you agree to the terms and conditions of the permit, including these insurance requirements.

You should provide your insurance provider with a copy of the signed Indemnity Agreement and these written requirements to assure a complete submittal and prompt processing for approval of your permit application.

A complete insurance submittal consists of the following:				
	Signed Indemnity Agreement (attached)			
	Certificate of Insurance			
	General Liability - Named Additional Insured Endorsement in favor of City			
	General Liability - Primary/Non-Contributory Endorsement in favor of City			
	Auto Liability - Named Additional Insured Endorsement in favor of City			
	Auto Liability - Primary/Non-Contributory Endorsement in favor of City			
	Workers' Compensation - Waiver of Subrogation Endorsement in favor of City			

No insurance submittals will be reviewed until a completed, signed application form has been submitted along with the required fees.



CITY OF SEBASTOPOL ENCROACHMENT PERMIT APPLICATION

Indemnity Agreement and Acknowledgment of Insurance Requirements

The undersigned Applicant and/or Contractor hereby affirm(s) that for the purpose of the Insurance Requirements for Contractors (Encroachment Permits) attached hereto and incorporated herein by reference, and in consideration of approval by the City of the Encroachment Permit, the Encroachment Permit is considered to be a written contract and a binding agreement between the City and the Contractor to provide the required coverage, and that a copy of this agreement and requirements have been provided to the Insurer.

The undersigned further agree(s) to defend, hold harmless, indemnify and defend the City, its officers, officials, employees and volunteers from and against any and all claims, damages, losses and expenses, including attorney fees, real or alleged liability arising out of or in connection with the work performed by the Applicant and/or Contractor.

Applicant and/or Contractor agree(s) to assume sole and complete responsibility for job site conditions during the course of construction of this project, including safety of all persons and property, that this requirement shall apply continuously and not be limited to normal working hours.

CONTRACTOR'S SIGNATURE

Signed:		Date:	
	Contractor		
Print Name:			
Company Name:			
APPLICANT'S SIGNATURE	E (IF APPLICANT	Γ IS NOT CONTRACTOR PERF	ORMING WORK)
Signed:		Date:	
1	Applicant		
Print Name:			
Company Name:			
	FOR	CITY USE	
Fees Paid: \$	Date:	Receipt Number:	
		_	
Permit Number:		Date Approved:	