

CITY OF WEBSTER CITY ENCROACHMENT PERMIT APPLICATION

I.) GENERAL INFORMATION

Date: _____

Permit Number: _____
(office use only)

Name of Applicant: _____

Address of Applicant: _____

Phone Number of Applicant: _____

Signature of Property Owner: _____

Type of Permit Requested: _____

Length of Time Requested for Permit: _____

- 1. Provide a Copy of Insurance Certificate or Special Endorsement Form with application (releasing the City, its elected boards, officers, agents and employees from liability or the above mentioned as being additionally insured)**
 - 2. Either the City or the permit holder may terminate permit by giving to the other party thirty (30) days written notice.**
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II.) SITE INFORMATION

Describe Location of Requested Encroachment:

Adjacent Streets, Measurements of Sidewalks, Distance from Streets or Alleys: _____

Describe Requested Encroachment Completely:

What is it, what does it include, measurements, contents on sign, etc: _____

Maximum height of encroachment: _____ Maximum width of encroachment: _____

Approximate square footage of encroachment: _____

Describe any construction that will take place: _____

III.) SITE PLAN

Attach on separate sheet of paper.

IV.) INSPECTION DEPARTMENT (office use only)

Does this proposed encroachment comply with the City's Encroachment Policy? _____

If "no" explain: _____

Type of Encroachment Permit issued (temporary or permanent). List any conditions that were applied to this permit. _____

Length of permit issued, if applicable (3-day, 3-month, permanent): _____

Date: _____ Signed: _____

A copy of the approved City Council resolution must be attached to this application.