ENCROACHMENT REMOVAL AGREEMENT APPLICATION

CITY OF OCEANSIDE ENGINEERING DIVISION

COMPLETE THE INFORMATION BELOW

Project Address:							
Owner/Applicant					Phone:		
Mailing Address:					Fax:		
City/State/Zip					E-Mail:		
Contact:					Phone:		
Address:					E-Mail:		
Explain the reason for encroachm	nent:						
Encroachment is located on:							
Street/Right-Of-Way width	Easement Type			/pe	Easement width		
Is this encroachment associated			∕es □ No	List Project File No:	Project Plar	ı No:	
Detailed description of encroachn	nent:						
Encroachment Constructed	Yes		_ No			_	
NOTE: Any construction perfor Traffic Control Plan to Enginee							
Construction Certificate Permit N0			Traffic Control I		Permit No		
Submittal Check List:							
☐ Preliminary Title Report/Vesting Deed			Deeds/Reference Maps				
☐ Assessor's Map] Site Map (Exhibit A) Provide 5 copies.				
☐ Photograph			Signature	Authority			
☐ Transmittal Letter			Encroachment Removal Agreement				
Received By:	Date:		Processing	g Fee: \$	Permit No: ERA-		

NOTE: The legal owner(s) of the parcel involved will be responsible for the accuracy of all the information submitted in connection with this application. All costs related to the preparation, submittal and recording of ERA shall be at the owner/applicant's sole expense. By accepting the application, the City of Oceanside, its officers, boards, commissioners, employees, agents and representitives, make no warranties, expressed or implied, that permission to place the encroachment with-in the right-of-way/easement will be granted or ERA will be approved.

The owner is hereby informed that any private improvements placed within the public right-of-way/easement by owner, its agents and/or contractors without prior written approval and consent by the City is done so at the owner's sole responsibility and risk, and subject to the provisions of Chapter 31 of the Oceanside City Code.