

Permit No: _____



City of Capitola Public Works Department

420 Capitola Avenue • Capitola • 95010

831.475.7300 • www.cityofcapitola.org

Encroachment Permit

Any person, firm or corporation encroaching into the public right-of-way, or water course to do work, store materials, erect or place any structure is required to obtain an Encroachment Permit per Capitola Municipal Code Section 12.56

Job Address

Description of Work

Contractor

State License Number

Contact Name

Email

Phone - Office

Phone - Cell

Phone - 24-hour Emergency

Estimated Job Start Date

Completion Date

CERTIFICATE OF INSURANCE AND LICENSE COMPLIANCE

WORKER'S COMPENSATION (Labor Code Section 3800)

- 1.a. I have attached a certificate of insurance which shows that I carry Worker's Compensation Insurance for work to be done under this permit.
- b. I have on file with the Capitola Public Works Department a certificate of insurance as described in (a) above.
2. I have attached a certificate of consent to self-insure issued by the Director of Industrial Relations.
3. I certify that in the performance of the work for which this permit is issued I shall not employ any person in any manner so as to become subject to the worker's compensation laws of California.

COMPREHENSIVE GENERAL AND AUTO LIABILITY

- 1.a. I have attached a certificate of insurance which shows that I carry General and Auto Liability, (\$1,000,000 minimum each for Personal injury and Property Damage), for work to be done under this permit. The above named certificate of insurance shall name the City of Capitola as an additional insured.
- b. I have on file with the Capitola Public Works Department a Certificate of Insurance as described in (a) above.
2. As a public utility agency we are exempt.

CONTRACTOR'S LICENSING (Business and Professions Code Section 7031.5)

1. As the applicant, I am licensed under the provisions of the Contractor's License Law. My license number _____ in classification _____ is in full force and effect.
2. I am exempt from the "License Required" provisions of the Contractor's License Law, State basis of exemption: _____

I understand that this permit is automatically revoked at any time should the required Worker's Compensation Insurance become expired or terminated. I agree to indemnify, defend, and hold harmless the City of Capitola, its officers, agents and employees, from and against all claims, demands, actions, damages, or judgments, including associated costs of investigation and defense to the extent caused by contractor's negligence, recklessness, or willful misconduct in the performance of the work.

Signature of Contractor _____ Date _____

Worker's Compensation Certificate Verified by _____ Date _____

Fee to be calculated by staff

Fee Schedule City Council Resolution No. 4036 Adopted 11/24/15 Effective date 7/1/16	
Non-Construction Items	\$ 61.00
Village Sign Sidewalk Encroachment Permit	\$ 36.00
Utility Fees	
Level A	\$ 185.00
Level B	\$ 410.00
Level C	\$ 820.00
Level D	\$1,333.00
Level E	\$1,847.00
Private Improvements Encroachment Agreement	
Minor Revocable Encroachment	\$ 205.00
Major Revocable Encroachment	\$ 513.00
Permit Fee	_____
Information Technology Fee 5% of Permit Fee	_____
TOTAL FEE	_____

Permit Number: _____	Staff Approval: _____	Date: _____ <small>Valid for one (1) year from issuance</small>
Permit Conditions:	_____ _____	

Permitted Work Hours: Monday – Friday, 8:00 a.m. – 5:00 p.m. Weekend work is prohibited except for emergency work approved by the City Engineer.

Call the Public Works Department at (831) 475-7300 twenty-four (24) hours in advance to schedule an inspection.