



CITY OF CAPITOLA PUBLIC WORKS DEPARTMENT

420 CAPITOLA AVENUE • CAPITOLA • CA • 95010
(831) 475-7300 • CapitolaDPW@ci.capitola.ca.us

REVOCABLE ENCROACHMENT PERMIT APPLICATION

SUBMIT WITH YOUR APPLICATION:

1. **Site Plan of improvements including property lines**
2. **Copy of Current Property Deed and Legal Description**

Project Address _____ Assessor's Parcel Number(s) _____

Description of Improvements _____

- Minor Encroachment Permit** - Requires staff review. Includes landscaping, fencing, walkways, or similar improvements that do not remove existing parking spaces. (permit fee + tech fee)
- Major Encroachment Permit** - Requires Planning Commission review. Includes walls, or similar improvements requiring structural support or extending 42" above grade, or removing existing parking spaces. (permit fee + tech fee)

Property Owner _____

Mailing Address _____

Phone (h) _____

Phone (c) _____

Email _____

Agent/Representative _____

(If different from property owner) _____

Mailing Address _____

Phone (h) _____

Phone (c) _____

Email _____

"I hereby declare that the facts given on this application are true and correct to the best of my knowledge and I agree to, and authorize, such investigations as are deemed necessary by the City of Capitola Public Works Department for the preparation of reports, agreements, documents related to this application, including the right of access to the property involved."

PROPERTY OWNER SIGNATURE: _____

APPLICANT OR AGENT SIGNATURE: _____