

(707) 668-5655
Fax: (707) 668-5916
www.bluelake.ca.gov



CITY OF BLUE LAKE
CALIFORNIA

111 Greenwood Road
P.O. Box 458
Blue Lake, CA 95525

Encroachment Permit Application

Applicant Number: _____ APN Number: _____

Applicant Name: _____ Phone Number: _____

Address: _____

Email Address: _____

Type of Project (select one) Construction Parade/Festival Misc.(describe)

Location (attach map) and Scope of Work: _____

Person Performing Construction (if applicable): _____ State License # _____

Estimate Start date/time: _____ Estimated Completion _____

Indemnity and Hold Harmless:

The undersigned does hereby agree to comply with all current City of Blue Lake regulations found in the Municipal Code and other ordinances, and with any general provisions or special conditions as stated on this permit. The undersigned shall be responsible for all claims and liabilities arising out of work performed pursuant to the Encroachment Permit, or arising out of the undersigned and his/her agent's failure to perform any of the requirements of the Permit. The undersigned hereby release, discharge, covenant not to sue, the City of Blue Lake, its employees, agents, volunteers, officers (collectively releasee) from all liability, claims, demands, losses or damages, sustained by me, my guardians, legal representatives or assigns, caused or alleged to be caused, in whole or in part, by the negligence of the releasees or otherwise, and further agree that if, despite this release, I, my guardians, legal representatives or assigns or anyone makes a claim against any of the releasee named above, I will indemnify, save and hold harmless each of the releasees from any

For purposes of Indemnity and Additional Insured Endorsement requirements, work shall be deemed to be performed for the City if the work is performed for or by parties who have been issued a permit by the City. Any contractor hired to perform work under this permit, must also sign the application. In signing this permit, applicant and/or contractor agrees to the insurance requirements and the terms and conditions stated hereon and/or attached hereto:

Signature of Contractor _____ Contractor # _____ Date _____

Signature of Applicant _____ Date _____



Encroachment Permit Terms and Conditions

An Encroachment Permit is required for anyone that will be working in or blocking the City right-of-way by any means per Municipal Code 12.08. Encroachment permits expire 30 days from the date of issuance unless otherwise specified in the permit.

In addition to the Completed Encroachment permit Application, you must submit the following:

___ Applicant (if a business) or contractor must have a valid City of Blue Lake Business License per Title 5 of the Blue Lake Municipal Code.

___ For construction projects, attach one (1) copy of detailed construction plans with a brief description of the work to be performed in the City right-of-way.

___ For parades and other minor right-of-way closures and/or uses, attach one (1) copy of detailed use of City right-of-way.

___ Attach a traffic control plan detailing lane, shoulder and/or parking closures and any required pedestrian re-routing for sidewalk closures. Show type, location and spacing of traffic control devices (signs, cones, barricades, etc) and location of flaggers, if necessary.

___ Attach required Insurance as described below:

Insurance Requirements:

Commercial General Liability Insurance no less broad than ISO form CG 00 01 with minimum limits of \$1,000,000 per Occurrence; \$2,000,000 General Aggregate. The City of Blue Lake must be an additional insured for liability arising out of ongoing and completed operations by or on behalf of the contractor. City of Blue Lake shall continue to be an additional insured for completed operations for (1) year after completion of the work. Attach a Certificate of Insurance naming the City of Blue Lake as additional insured; an Additional Insured Endorsement at least as broad as ISO form CG 20 12 or 20 26 and CG 20 37 must also be provided. **Automobile Liability** insurance in the amount of \$1,000,000 per occurrence. **Workers' Compensation Insurance** with statutory limits as required by the State of California Labor Code. If the Permittee has no employees, Permittee may sign a certification stating such. The insurance provided to the City of Blue Lake as an additional insured must apply on a primary and non-contributory basis with respect to any insurance or self-insurance program maintained by the City of Blue Lake. Permittee grants to the City a waiver of any right to subrogation which any insurer of Permittee may acquire against the City by virtue of the payment of any loss under such insurance. Permittee agrees to obtain any endorsement that may be necessary to affect this waiver of subrogation. The Workers' Compensation policy shall be endorsed with a waiver of subrogation in favor of the City for all work performed by the Permittee, its employees, agents and subcontractors.

Return all required, completed and signed document to the City of Blue Lake at the address listed above during regular business hours - Monday-Friday, 9 a.m. - 4 p.m. (closed 12-1 p.m.)

For full Blue Lake Municipal Code, please visit our website at: www.bluelake.ca.gov.