



SOLANO IRRIGATION DISTRICT

ENCROACHMENT PERMIT APPLICATION

Clearly print or type the information below and return this form, drawing(s) and non-refundable application fee to the District's Engineering Department (810 Vaca Valley Parkway, Suite 201) for review and comment. Please allow 2-3 weeks to receive a response from the District.

Note: Original signed Application shall be retained by the District; upon final Applicant's signature, a copy of the approved Application (Permit) will be provided to the Applicant.

Applicant (Permittee) Information:

Company / Landowner

Best Person to Contact

Name: _____
Address: _____
Phone: _____

Name: _____
Office Phone: _____
Cell Phone: _____
Email: _____

Location of Encroachment:

Assessor's Parcel Number (APN): _____
Street Address: _____
N/S/E/W side of Road Name: _____
Name of nearest Intersection / X-Street: _____
Distance & Direction from Intersection (ft/mi): _____

Brief Description of Proposed Work / Encroachment:

A preliminary measured drawing or sketch must be submitted with each application. It should contain the following: overall site and cross-section views, all pertinent dimensions (i.e. depths, distances & separations), existing & proposed facilities, property lines & rights-of way, etc.

Duration of encroachment: Permanent Temporary If temporary, length of encroachment: _____
Date the proposed work / encroachment scheduled to begin? _____ End date? _____



NO WORK MAY ENTER or CROSS A DISTRICT RIGHT-OF-WAY WHICH MAY, IN ANY WAY, AFFECT A DISTRICT FACILITY DURING THE IRRIGATION SEASON, TYPICALLY from MARCH 1ST to OCTOBER 15TH.

By signing below, I hereby certify that all information provided is true and correct to the best of my knowledge. On behalf of the Company, I fully understand and agree to complete the proposed work in complete conformance with all Conditions per an approved Permit, including the latest revision of the District's Standard Specifications and Details. All work shall also conform to all required City, County, State and Federal Codes and Ordinances. Prior to receiving an approved Permit, I will sign a District Work Order and pay the applicable fees. I understand I can withdraw this Application or cancel the Permit at any time prior to the work commencement and all unused monies due will be returned. All construction activities proposed per this Application **SHALL NOT** commence until I receive and accept this Application signed and approved by the District.

Signature of Applicant _____ Title of Applicant _____ Date _____

***** FOR OFFICE USE - DO NOT WRITE BELOW (UNTIL DIRECTED BY DISTRICT) *****

Application & Payment Received By: _____ Date: _____ Paid By: _____ Check No: _____ Amount: _____
Received with Application: Drawing/Sketch Improvement Plan set Record Survey Parcel Map Other Agency Permits
Application part of Development Project: Yes No Name of Development: _____ Work Order No: _____
Service Area: _____ Name of Pipeline / Canal: _____ Station No: _____ Eng. Reviewer: _____ Date: _____

Application Approved and Permit Issued By District:

Std. Conditions Accepted: Yes No Suppl. Conditions Accepted: Yes No n/a

District waives the requirement for the construction or installation to be performed by duly licensed person(s): Yes No

General Manager or Director of Engineering _____ District Title _____ Date _____

Permit Number: _____