



Know what's below.
Call before you dig.

CITY SERVICES DEPARTMENT

P: (559) 562-7102 Ext 4 F: (559) 562-5748

P.O. Box 369 · 150 N. Mirage, Lindsay, CA 93247



ENCROACHMENT/EXCAVATION PERMIT APPLICATION

GENERAL ANNUAL DESCRIPTION OF WORK: _____

APPLICANT: _____ PHONE: () _____

ADDRESS: _____ ZIP _____

PERMIT NO:

APPLICATION IS HEREBY MADE FOR AN ENCROACHMENT PERMIT TO PERFORM THE FOLLOWING:

1. APPLICANT'S WORK ORDER JOB NUMBER _____

2. LOCATION OF WORK: _____ BETWEEN _____
NAME OF ROAD CROSS ROAD OR ADDRESS

3. GENERAL DESCRIPTION OF WORK TO BE DONE:

A. Excavations: _____
width depth length surface material

B. Conduit/Pipe: _____
(Type: pvc, metal, etc) diameter (conveying: water, gas, etc)

C. Other: _____
(Sidewalk, sign, driveway, etc) description

4. ESTIMATED START DATE: _____ DAYS FOR COMPLETION _____

5. APPLICANT'S CONTRACTOR:

NAME: _____ PHONE NO: _____ LICENSE NO: _____

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE IT IS CORRECT AND AGREE TO COMPLY WITH ALL APPLICABLE STATE LAWS REGULATING SUCH WORK, WITH THE PROVISIONS OF ORDINANCE NO 360 OF THE CITY OF LINDSAY, AND THE SPECIFICATIONS ATTACHED HERETO. I AGREE TO DEFEND, IDEMNIFY, AND HOLD HARMLESS THE CITY OF LINDSAY AND ITS OFFICERS, EMPLOYEES, AND AGENTS AGAINST ALL CLAIMS, ACTIONS, AND LIABILITIES OF ANY KIND WHICH MAY ARISE OR ACCRUE IN CONSEQUENCE OF GRANTING THIS PERMIT. LINDSAY MUNICIPAL CODE SECTION 12.04.100

SIGNED: _____ DATE: _____

APPLICANT CHECK LIST:

- WORKER'S COMPENSATION & CERTIFICATE OF LIABILITY INSURANCE SUBMITTED WITH APPLICATION
- CITY BUSINESS LICENSE NO _____
- THREE COPIES OF THE SITE PLAN
- THREE COPIES OF THE TRAFFIC CONTROL PLAN
- PEDESTRIAN RIGHT OF WAY IS ADDRESSED ON THE TRAFFIC CONTROL PLAN
- DESCRIPTION OR SCHEDULE OF WORK TO BE PERFORMED. DAY, WEEK OR SHIFT. (PROGRESS WILL BE MONITORED, REVIEWED AND APPROVED ON A WEEKLY BASIS).

APPLICATIONS WILL BE KEPT ON FILE A MAXIMUM OF 60 DAYS. YOU MUST ACTIVATE YOUR APPLICATION BY CALLING THE CITY SERVICES DEPARTMENT AT 559-562-7102 EXT 4. A MINIMUM OF 48 HOURS PRIOR TO THE START OF WORK.

DEPARTMENT USE ONLY

PERMIT FEE

PERMIT NO

ENGINEER/INSPECTOR APPROVAL

DATE:

REQUIREMENTS FOR CERTIFICATES OF INSURANCE

- 1) The City of Lindsay requirements are set for by Resolution Number 19-24. (May 14, 2019)
- 2) The City of Lindsay requires all certificates of insurance to be submitted on a standard Acord form or on the insurance company's letterhead. The City does not accept declaration pages. The named additional insured endorsement signed by an authorized representative of the insurance carrier must accompany the certificate of insurance.
- 3) The Insurance Company must either be licensed to do business in the State of California or have a Best Guide Rating of A-VII or better.
- 4) The City of Lindsay must be listed as the certificate holder as well as an additional insured with respects to General Liability and Automobile Liability. For example, "The City of Lindsay, its officials, agents, employees & volunteers".
- 5) The City of Lindsay does not accept California Assigned Risk until it is accepted by a valid insurance company which meets the requirements in the number (1) above, and is on the standardized Certificate of Insurance form with a valid policy number.
- 6) Minimum insurance requirements shall meet the following;
 - a) Risk Category 1; Driveways, Sidewalks, Curb & Gutter, 2 ft. asphalt pave out against gutter, tree trimming and any work within the sidewalk area
 - b) Risk Category 2: Work within the Street or Alley. Sewer lateral installation, alley or street paving, water or gas services installation in the street/alley.

Risk Category	Workers' Compensation	General Liability	Auto Liability
1	<p>Statutory</p> <p>Employer's Liability \$1,000,000</p>	<p>\$2,000,000 per occurrence (may accept \$1,000,000 per occurrence for lower risks)</p> <p>\$4,000,000 general aggregate</p> <p>\$1,000,000 products/completed operations aggregate</p>	<p>\$2,000,000 Combined Single Limit (may accept \$1,000,000 for lower risks)</p>
2	<p>Statutory</p> <p>Employer's Liability \$1,000,000</p>	<p>\$2,000,000+ per occurrence</p> <p>\$4,000,000+ general aggregate</p> <p>\$2,000,000+ products/completed operations aggregate</p>	<p>\$2,000,000+ Combined Single Limit</p>