



**COUNTY OF ALPINE**  
**Community Development**  
50 Diamond Valley Rd  
Markleeville, CA 96120  
530-694-2140 530-694-2149  
[Website: Alpinecountyca.gov](http://Website:Alpinecountyca.gov)

### Encroachment Permit Application

In Compliance With Alpine County Code 12.08 and California Streets & Highways Code The Undersigned Hereby Applies For Permission To Construct The Following Improvement Or Otherwise Encroach Upon A County Road Reservation Or Right Of Way, As Follows:  
Complete all items below. If item is not applicable enter "N/A".  
*Application is not complete until all required attachments are included.*

Situs Address: \_\_\_\_\_ APN: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Applicant Phone #: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant Email: \_\_\_\_\_

#### Excavation:

Max Depth: \_\_\_\_\_ Average Depth: \_\_\_\_\_ Average Width \_\_\_\_\_

Length: \_\_\_\_\_ Road Surface Type: \_\_\_\_\_

#### Pipes:

Type: \_\_\_\_\_ Diameter: \_\_\_\_\_

Voltage or PSIG: \_\_\_\_\_

On What Side of the County Road will the work be Performed:

North          South          East          West

*FULLY DESCRIBE WORK TO BE PERFORMED WITHIN COUNTY RIGHT OF WAY. (Who, What, Where, When, Why, How)*

*Attach complete drawings (\_\_\_ sets) folded to 8.5"by 11" showing specifications, calculations, maps etc. Attach additional pages if necessary. Incomplete or illegible applications will be returned for correction. **\*Applicants for driveway encroachments must mark the intended driveway location by a stake with orange paint or flag bearing the applicants last name, the address, and the Assessor's parcel number.***

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For County Use Only:	
Date Received: _____	Application #: _____
Received By: _____	Surety Amount: _____
Receipt #: _____	Total Amount Received: _____

“ATTACHMENT A”

*Please use this space to draw your project diagram, and/or attach additional plans:*

PLAN VIEW

PROFILE