

**DRIVEWAY/ENCROACHMENT  
PERMIT APPLICATION**

YUBA COUNTY DEPARTMENT OF PUBLIC WORKS  
915 8<sup>th</sup> Street, Suite 125  
Marysville, CA 95901  
PHONE: (530) 749-5420 FAX: (530) 749-5424  
Email: [publicworks@yuba.gov](mailto:publicworks@yuba.gov)

\_\_\_\_\_ Located \_\_\_\_\_ Of \_\_\_\_\_  
(Site Address) (Intersecting Road or Landmark)

APN: \_\_\_\_\_

**Owner:** \_\_\_\_\_ **Applicant Name:** \_\_\_\_\_

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

**Phone:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**General Contractor:** \_\_\_\_\_ **Sub-Contractor:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Email:** \_\_\_\_\_

List any additional sub-contractors on a separate sheet

**Application is made for permission to excavate, construct and/or otherwise encroach on county right of way by performing the work described below:**

**1. Description of Work:**

**2. Estimated cost of work in right of way:** \_\_\_\_\_

**3. Attach 3 sets of plans (show location, dimensions, etc. Include all pertinent information).**

**4. Submit traffic control plan if applicable.**

**5. Submit work schedule (include hours, days and what will take place each day).**

**Upon Signature,**

**Applicant agrees to abide by the conditions of this permit and its provisions. Applicant also acknowledges that the permit will expire within one year if construction has not been completed and no extension has been requested.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_