

County of Santa Barbara
Department of Public Works, Road Division Permit Office
4417 Cathedral Oaks Road
Santa Barbara, CA 93110
Santa Maria CA 93455

Road Encroachment Permit Application

Permit No. 19864-0000-01278

| ASSESSOR PARCEL NUMBER: 023 330 014 DATE: 11/23/2020 | |
|--|-------------|
| ENCROACHMENT ADDRESS: 1405 MISSION CANON RE City SANTA BARBARA Zip 93105 | |
| DESCRIPTION OF WORK: ASPHALT PAVENTA Q DATISHING ENTRANCE & CURB ENST | |
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| OWNERS INFORMATION | 7 |
| Name: ELENA - MUNO E-mail address: ELENA - MUNO VERS | 24 |
| Mailing Address: Po Box 919000 City SANTA BARBARA Zip 93190 | 1 |
| Telephone: (805) 403-0858 (Cell) // (Fax) NA | |
| | |
| Applicant Information Authorized Agent J (fill out Authorization Signature below if checked) | |
| Check one: CONTRACTOR [] ARCHITECT [] ENGINEER [] | |
| | |
| Company Name: CDB GROUP Representative BRANGON ARLENGITM, CED | |
| Telephone: (805) 896-8148 (Cell) // II E-mail 84@ COBGROUP. BIZ | |
| Address: PO BOX 91906 SANTA BARBARA, CA 93190 State License 991064 | |
| Worker's Comp. Insurer: FALLS LAKE FEEL & CAS MALTY COMPLEXED. Date: 12/20/2020 | |
| Check one: CONTRACTOR[] ARCHITECT[] ENGINEER[] | |
| | |
| Company Name: Registration No.: | |
| Telephone: (Cell) E-mail | |
| Address: | |
| Worker's Comp. Insurer:Exp. Date: | |
| Authorization Signature (fill out only if Authorized Agent box on box 1 is checked) | |
| TARGET CHECKED (Int out only it Authorized Agent box on box 1 is checked) | |
| I/We Essaya Munk authorize and give consent to Bandon Aritals Tow CDB GAD | P |
| (Print Owner Name) (Print Agent Name) my/our authorized agent to apply for, sign, and receive in my/our behalf, a Road Division Encroachment/Excavation Permit. I/we understant that are the local agent to apply for, sign, and receive in my/our behalf, a Road Division Encroachment/Excavation Permit. I/we understant that are the local agent to apply for, sign, and receive in my/our behalf, a Road Division Encroachment/Excavation Permit. I/we understant that are the local agent to apply for, sign, and receive in my/our behalf, a Road Division Encroachment/Excavation Permit. I/we understant that the local agent to apply for, sign, and receive in my/our behalf, a Road Division Encroachment/Excavation Permit. I/we understant the local agent to apply for the local a | |
| that as the legal property owner where the encroachment/excavation is to take place, that I/we are responsible and liable for all estimates | ind sts. |
| and liabilities associated with this Encroachment/Excavation Permit. | |
| Signed: 1/23/2020 | |
| Owner/Agent Signature (required to be filled out by owner or agent) | |
| I Boarban January Cos Group hereby make application to excavate and/or encroach in the Public Road/ | |
| Right-of-Way at the location(s) and as described herein, subject to the provisions required by Ordinance No. 1491, of Santa Barbara Counapplicable State or Federal Regulations, AND ANY SPECIFIED REQUIREMENTS ATTACHED HERETO. | ty, |
| It is agreed by the applicant that the County of Santa Barbara and any officer or employee thereof shall be saved harmless by the application any liability or responsibility for any accident, loss or damage to persons or property, happening or occurring as the proximate result any of the work undertaken under the terms of this application and the permit or permits which may be granted in response thereto, and that of said liabilities are hereby assumed by the applicant | |
| Signade Sall | |

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്ടെ അവ്യാവി അതിക്കുന്നത്. പ്രതിക്കുന്നത്. ഇത്തുന്നത് വര്യത്തുന്നത് വര്യത്തെ നടന്ന ഉത്തരത്തിലെ വര്യത്തി ആരോഗ് ആ രോഗ് പുവര്ത്തി ഇത്തെ ഇവരായ നടന്നിരുന്നു. ഇത്തെ പ്രതിന്നെ പ്രതിന്നെ ഉത്തര്യത്തെ നടന്ന് വര്യത്തിലെ നിര്ത്തി ഉത്തെ ഇത്തെ ആര് ക്രോസ് സ്വേഷ്യത്തിലെ നളത്ത് ഇത്തെന്നത്തിലെ അത്രം വര്യത്തെന്നു. ഇത്തര്യത്തെ വര്യത്തിലെ വര്യത്തെ വര്യത