

CAYUCOS SANITARY DISTRICT

200 Ash Ave.

P.O. Box 333, Cayucos, California 93430-0333

805-995-3290

GOVERNING BOARD

R. Enns, President
H. Fones, Vice-President
S. Lyon, Director
M. Foster, Director
D. Chivens, Director

ENCROACHMENT APPLICATION (SHORT FORM)

OWNER(S) NAME: _____ SERVICE ADDRESS: _____

APN#: _____ - _____ - _____

The following information must be provided to the District by the owner to enable completion of the encroachment permit application:

1. Provide a written statement describing the nature of the encroachment(s), specifying any and all appurtenances or structures that will encroach into the easement, including but not limited to eaves, decks, footings, fences, retaining walls and drainage facilities. This should include aerial encroachments, as well.

2. A drawing must be provided showing a footprint of all structures and appurtenances, and their relationship to the easement.

3. Please sign the statement of acceptance that follows.

I hereby agree to allow the Cayucos Sanitary District reasonable access to the sewer easement located on my property for purposes of inspection, maintenance, and sewer line repair or replacement in accordance with the original easement documents identifying and establishing this easement.

Accepted By:
Property owner signature _____

