

ENCROACHMENT PERMIT APPLICATION FORM

Request for Variance

TRI-DAM PROJECT

P.O.BOX 1158

PINECREST, CA 95364

(209) 785-3838

(209) 532-3838

Location: Calaveras County: \_\_\_\_\_ (Subdivision Name)

Tuolumne County: \_\_\_\_\_ (Subdivision Name)

Project Type: New Facilities \_\_\_\_\_ Addition/Replacement of Facilities \_\_\_\_\_

**Applicant(s):** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Business) \_\_\_\_\_

**Property Owner(s)-(If Different):** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Business) \_\_\_\_\_

Email Address: \_\_\_\_\_

**Primary Contact (if other than applicant):** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Business): \_\_\_\_\_

Email Address: \_\_\_\_\_

**Project Site Address:** \_\_\_\_\_

**Assessor's Parcel Number:** \_\_\_\_\_ **Lot #** \_\_\_\_\_

**Detailed Description of Proposed Variance:**

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**Detailed Explanation of Conditions to Support Variance: (Include Additional Sheet if Necessary)**

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**Will The Project Include Excavation?** Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, Estimate the Number of Cubic Yards of Material To Be Removed and Include a Detailed Description of The Manner In Which The Work Will Be Performed: \_\_\_\_\_

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**Make sure to include ALL of the following:**

1. Signed application form.
2. Site plan copies, as specified on the instruction sheets.
3. Application fee.

I, the property owner, consent to the filing of this application in conformance with the Shoreline Management Plan and FERC order. I acknowledge that I will be required to comply with applicable permit requirements, including other agency conditions and that I will be required to execute a Hold Harmless Agreement prior to permit finalization.

Signature(s): \_\_\_\_\_

\_\_\_\_\_

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

**FOR AGENCY USE ONLY**

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

Comments: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

Check #: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Initial Letter: \_\_\_\_\_

Notes: \_\_\_\_\_

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