

Date Received _____
Initials _____



City of Montrose

REVOCABLE RIGHT-OF-WAY **ENCROACHMENT PERMIT APPLICATION**

It is the applicant's responsibility to submit the required materials. Checks shall be made payable to *City of Montrose*. The application fee is non-refundable. All application materials should be submitted in digital format only. Please email application materials to planningmail@cityofmontrose.org. Large files may be shared via Dropbox or Google Drive.

Please contact Planning Services at (970) 240-1407 for assistance.

ADDRESS OF PROPERTY _____

ZONING/CURRENT LAND USE _____

PROPERTY OWNER	APPLICANT OR REPRESENTATIVE
NAME:	NAME:
MAILING ADDRESS:	MAILING ADDRESS:
CITY, STATE, ZIP:	CITY, STATE, ZIP:
PHONE:	PHONE:
EMAIL:	EMAIL:

REQUIRED APPLICATION MATERIALS

- \$50 non-refundable application fee (check, credit card, cash)
- Cover letter explaining the request with notarized signature of the owner (PDF)
- Recorded warranty deed with legal description of the property (PDF)
- The City may require an Improvement Location Certificate (ILC), prepared by a professional surveyor (PDF, DWG)
- Photos of the project area (jpeg, PNG)
- Site Plan (PDF)

Site Plans must include:

- Date, a north arrow, and a scale (no less than 1" = 100') in title box at lower right-hand corner
- 4" x 4" vicinity map showing general location of the project
- Show the footprint, dimensions, height, and location of existing and proposed structures. Indicate whether existing structures will remain or be removed
- Show setbacks from all property lines for existing and proposed structures
- Label street names for all existing and proposed streets
- Width and location of all existing and proposed public and private easements

IMPORTANT NOTES

Approval of this application does not constitute approval of any other City of Montrose permits or application reviews.

By signing, you certify that you have read and understood the submittal requirements, and that you understand omission of any listed items may cause delay in processing the application. The undersigned acknowledges that the information supplied in this application is as complete and accurate as possible.

Owner's Signature

Date

Applicant's or Representative's Signature

Date

CITY USE ONLY

Description of Encroachment: _____

Drawing of Encroachment (attach PDF)

Encroachment:

___ Approved

___ Denied

Staff Signature _____

Name _____ Date _____