



Street-Use and Mapping

T. 628.271.2000 | 49 South Van Ness Ave. 3rd Floor, San Francisco, CA 94103

APPLICATION FOR SIDEWALK PIPE BARRIER/ SECURITY BOLLARD PERMIT

BSM PERMIT#

For Official Use Only

SITE INFORMATION

Site Address: _____

Cross Street: _____ Block: _____ Lot: _____

APPLICANT/AUTHORIZED AGENT INFORMATION

NOTE: If you are not applying as the property owner, you **MUST** complete the Certificate of Authorized Agent section at the end of this form in order for Public Works to begin reviewing your application.

Agent of Owner Owner

Name: _____ Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

REQUIRED APPLICANT INFORMATION	
<input type="checkbox"/>	Individual Applicant: Driver's License or State ID Number _____
<input type="checkbox"/>	Business Applicant: San Francisco Business Account Number _____
OR	State License Number _____ <input type="checkbox"/> Architect <input type="checkbox"/> Engineer <input type="checkbox"/> Contractor

PROPERTY OWNER INFORMATION (Leave blank if applicant is property owner)

Owner Name: _____

Phone: _____ E-Mail: _____

_____	_____	_____
Print Name	Signature of Applicant/Authorized Agent	Date

INSTRUCTIONS FOR SIDEWALK PIPE BARRIER PERMIT

- Include a completely dimensioned site plan to show the extent and location(s) of the proposed installation of the pipe barriers (bollards). Do not send building plans.
- Application fees are applicable, payable by credit card or check issued to San Francisco Public Works.
- Applicant shall submit all necessary fees (See Fee Schedule) for notarization and recordation of approved permit. (Notary Public Services and Recorder's Office are located at City Hall, Room 190)



EMAIL

Electronic copies (PDF) of the application materials may be sent to: BSMPermitDivision@sfdpw.org



Street-Use and Mapping

T. 628.271.2000 | 49 South Van Ness Ave. 3rd Floor, San Francisco, CA 94103

CERTIFICATION OF AUTHORIZED AGENT

_____ **[Project Address]** **[Block]** **[Lot]** **[Zip Code]**

Public Works Permit Number (s) _____

Building Permit Application (BPA) Number _____

I/We, _____, hereby certify for the purpose of
[Name of Property Owner(s) – Print]

completing and submitting an application for street/sidewalk-use permit(s) with San Francisco Public Works, Bureau of Street-Use and Mapping, and for the completion of any form related to the San Francisco Public Works Code and/or to any City and County Ordinances and regulations, or State Codes, I/we are authorizing

_____ to sign all documents
[Name of Agent(s) – Print]

connected with this application(s) or permit(s).

I/We also acknowledge that certain permits for encroachments within the public right of way incur annual assessment fees and will be recorded against property title for life of encroachment.

_____ **[Authorized Agent Signature]** **[Phone Number]**

_____ **[CA Contractor, Driver's or SF Business License number]** **[Date]**

_____ **[Property Owner Signature]** **[Phone Number]** **[Date]**