

Street-Use and Mapping

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

APPLICATION FOR OVERWIDE DRIVEWAY

BSM PERMIT#

		L				
			For Official Use Only			
SITE INFORMATION						
Site Address:						
Cross Street:	Block: _		Lot:			
APPLICANT/AUTHORIZED AGEI	NT INFORMATION					
NOTE: If you are <u>not</u> applying as the page of this form in						
Agent of Owner Owner						
Name:	Company Name:	Company Name:				
Address:						
City:			Zip:			
Phone:	E-Mail:					
REQU	IRED APPLICANT INFORM	IATION				
☐ Individual Applicant: Driver's L	icense or State ID Number					
Business Applicant: San Franc	cisco Business Account Numbe	er				
OR State License Number	Architect	☐ Engineer	☐ Contractor			
PROPERTY OWNER INFORMAT	ION (I eave blank if applicant i	s nronerty owner	1			
Owner Name:	,	s property owner	1			
Phone:	F-Mail:					

TE ADDRESS:		For Official Use Only
ROJECT INFORMATION		
escription and Purpose		
Print Name	Signature of Owner/ Applicant/ Authorized Agent(s)	Date

BSM PERMIT#

INSTRUCTIONS FOR OBTAINING AN OVERWIDE DRIVEWAY PERMIT

- Include a completely dimensioned site plan showing the subject property and any immediately adjacent lot. Show the sidewalk fronting these properties, any existing driveways and the location(s) of the proposed driveway(s).
- The applicant shall be responsible for submitting any fees, documents, reports and other information to the various City agencies as required.
- The Street Improvement Permit shall be applied for at:



EMAIL

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

.....

- Further information, contact the Bureau of Street-Use and Mapping at (628) 271-2000.
- Once the San Francisco Public Works tentatively approves the permit, the applicant is responsible for having it notarized and recorded and for all fees associated with that process. 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)



Street-Use and Mapping

T. 628.271.2000 \perp 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			
/We,[Name of Property Owner(s) – Print]	_, hereby certify for th	e purpose	of
completing and submitting an application for str			
Public Works, Bureau of Street-Use and Mappir	·		
to the San Francisco Public Works Code and/or	to any City and Coun	ty Ordinar	ices and
regulations, or State Codes, I/we are authorizing	g		
[Name of Agent(s) – Print]		to sign all	documents
connected with this application(s) or permit(s).			
I/We also acknowledge that certain permits for one of the control		•	•
[Authorized Agent Signature	<u>)</u>	[Phone	Number]
[CA Contractor, Driver's or SF Business	License number]		[Date]
[Property Owner Signature]	[Phone Number]		 [Date]