



Street-Use and Mapping

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

APPLICATION FOR RIGHT OF WAY CONFORMITY

BLDG. PERMIT APPLICATION # _____

BSM PERMIT#

For Official Use Only

SITE INFORMATION

Site Address: _____

Site / Addendum: _____ Block: _____ Lot: _____

Scope of Work: Addition Remodel Seismic Tenant Improvement Other

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.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

Submitted Date: _____ Non-refundable fee: (see fee schedule)

REQUIRED APPLICANT INFORMATION

Individual Applicant: Driver's License or State ID Number _____

Business Applicant: San Francisco Business Account Number _____

OR State License Number _____ Architect Engineer Contractor

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

Owner Name: _____

Phone: _____ E-Mail: _____

BSM PERMIT#

For Official Use Only

SITE ADDRESS: _____

This permission granted allows Bureau of Street-Use and Mapping (BSM) to ONLY recommend the early release of the applicant's Building Permit Application. It is not the intent of this permit to waive any additional BSM permits that may result at the time of the public-right-of-way inspection; after construction has been or is close to being completed. The inspection shall verify whether the existing condition of the public-right-of-way conforms to City Standards and the condition satisfies Department of Public Works requirement and as per the photos submitted by the applicant. NO alterations shall be allowed under this permit.

Applicant acknowledges and understands the above mentioned specific requirements and those of any additional identified permit that may be required from DPW-BSM. The applications, plans and fees for said additional permits shall be submitted in full with those applications NOT ELIGIBLE for expedited permit review.

These Public Works permits shall be issued and work completed prior to the issuance of any Temporary Certificate of Occupancy (TCO) or Certificate of Final Completion and Occupancy (CFCO/aka Final). Except for excavation to install utilities, applicant may not apply for a street improvement permit any other BSM permits toward this project until after the inspection.

FOR APPROVAL

- Submit photos of the existing curb and sidewalk frontage-minimum three (3) photos with accurate time stamp.

If site conditions do not meet City Standards and/or damaged at the time of application review, a Street Improvement permit application shall be required in lieu of an Inspection of Conformity.

Print Name

Signature of Applicant/Authorized Agent

Date



EMAIL

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



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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]**