



EASEMENT USE APPLICATION

Name: _____

Address _____

Phone Number _____

Legal Description _____

Type of Easement _____
(Map Must be attached)

Location of Easement _____

Type of activity requested in easement area: _____

Need for encroachment into easement: _____

I hereby certify that I have read and understand St. Joseph Code of Ordinance 302, Limiting Activities in an Easement area, and are hereby requesting authority to place an obstruction in the above stated easement. I further acknowledge that the City of St. Joseph only allows activity in an easement area through an application process, whereby the Public Works Department reviews the application and makes a recommendation to the City Council.

I agree to indemnify and hold harmless the City, its agents or employees, from any claims, injuries, or damages in the event the City needs to access the easement described above and remove any obstruction in the easement. The City will not be held responsible for any damages or loss in the event the City needs to remove the obstruction.

Property Owner Signature

Date

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PUBLIC WORKS DEPARTMENT COMMENTS

Recommendation _____ Approval _____ Denial _____

Comments: _____

Public Works Department

Date