

## Encroachment Permit Application Mail to: 130 Gardeners Circle, Suite 123 Johns Island, SC 29455 CassiquePropertyOwners@kiawah.com

Applicant Information

Company N	lame:						
Address:							
	Street Address				Unit #		
	City				State	ZIP Code	
Phone:		_ Em	nail:				
Job site For	reman:						
Is a copy of the Charleston County YES NO Business License attached?			lf no, ha	s it been previous	YES	NO □	
Is the evidence of Workman's YES NO Compensation attached?			lf no ha	s it been previous	YES	NO □	
Is the evidence of general and automobile YES NO liability coverage attached?			NO		s it been previous	YES	
Are photos of the existing right-of-way YES NO easement conditions attached?			lf no, ha	s it been previous	YES	NO □	
		Job	o Site Inforn	nation			
Specific job	site location:						
Type of wor	rk to be performed:						
Start Date: Anticipated completion date:							
Will stakes and ropes be installed at the right-of-way for parking?			YES				
Are you requesting additional parking location approval?							
If yes, wher	·e:						
Do you require an onsite dumpster?				YES YES			
Do you require an onsite temporary toilet?							
	Con	diti <u>on</u> s	of Permit a	and <u>Sign</u>	ature		
Cassique is	s a private community. The roa	ds and	right-of-ways	are owne	ed and maintaine	ed by the Cassique	

Homeowners Association, Inc. (CHA). They are NOT public domain. Any unauthorized work will be treated as trespassing on private property and dealt with accordingly. You are liable for damages to the property of others resulting from your actions.

- 1. Contractor will abide by all rules and regulations of the CHA.
- 2. No boring under paved areas without written approval of the CHA Administrator.\*
- 3. No cutting or excavation of pavement without written approval of the CHA Administrator.\*
- 4. No alteration of drainage system without written approval of the CHA Administrator.\*
- 5. Permit must be displayed at all times.
- Workers must immediately report any damages of utility lines, streets, pavements or drainage systems to 6. the CHA Administrator (CassiquePropertyOwners@Kiawah.com)
- 7. Notify CHA Administrator immediately upon completion of work.

\*Requires additional written approval from CHA Administrator after review of plans and details.

I agree to the conditions of issuance of the Encroachment Permit and will complete the job and any damage restoration to the satisfaction of CHA.

Contractor Signature:

## CHA Permit Office Use Only

Permit Number Issued: CHA Administrator Signature: Notes:

Date:

Date:

Date: