

RIGHT OF WAY ENCROACHMENT PERMIT APPLICATION

Please fill out this application completely and submit along with all required attachments and fees to the City of Concord Planning Department at:
Via US Postal Service: P.O. Box 308, Concord, NC 28026-308
Via Hand Delivery or Delivery Service: 35 Cabarrus Ave. W. Concord, NC 28025
Via Email: planning@concordnc.gov

**Applicants within the Downtown MSD must follow the
Downtown Sidewalk Design Guidelines**

ALL INFORMATION MUST BE PRINTED OR TYPED LEGIBLY

Fee Amount: \$175.00

Date Paid: _____

Date Received: _____

Applicant Information:

Name: _____

Corporate Name, if different from location name: _____

Address: _____

Mailing Address, if different: _____

PIN #: _____ Tax ID #: _____

Telephone: _____

Owner and Manager Information:

Owner Name (Corporate Name if applicable): _____

Specific Contact Name (if Owner is other than a natural person): _____

Owner Address: _____

Owner Mailing Address: _____

Owner Telephone: _____

Manager Name: _____

Manager Address: _____

Manager Mailing Address: _____

Manager Telephone: _____

RIGHT OF WAY ENCROACHMENT PERMIT APPLICATION (CONT'D)

Hours of Operation:

Hours of Operation:

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Saturday _____

Sunday _____

Hours of Operation of Sidewalk Dining/Merchandise Display (if different than normal hours of operation):

Type of food, beverage, product, or merchandise to be served or displayed:

Detail of furnishings and items to be placed within the public right of way.

Narrative detailing the installation procedure and plan notes as necessary.

RIGHT OF WAY ENCROACHMENT PERMIT APPLICATION (CONT'D)

The following items **MUST** be attached for the Application to be complete:

- 1. Scale drawing or site plan** with dimensions showing the section of the right of way proposed to be encroached upon;
- 2. Evidence of liability insurance in the amount of \$1,000,000.00.**
- 3.** Copies of any and **all permits and licenses** issued by the state, county or city including health and ABC permits, if any, necessary for the operation of a restaurant. If permits have been applied for, but not yet issued, attach a copy of the application.
- 4. Processing and investigation fee in the amount of \$175.00.**

PLEASE NOTE: You have a continuing duty to update the information contained in this Application. This Application shall become an attachment to and part of any Permit issued to you. Failure to update the information contained in this Application may result in denial of your Application or revocation of any such Permit that has already been issued.

Applicants within the [Downtown MSD](#) must follow the
Downtown Sidewalk Design Guidelines