



Traffic Engineering Section
 Public Works Department
 555 Liberty Street SE, Room 325 Telephone: 503-588-6211
 Salem, Oregon 97301-3503 TTY: 503-588-6292

AWNING OVER PUBLIC SIDEWALK
 Permit Fee \$80.00
 Automation Fee 2.50
 Processing Fee 10.00
 Total Payment \$92.50

Permit No.

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**APPLICATION FOR
 PERMIT TO PLACE AWNING OVER PUBLIC SIDEWALK**

Business: _____

Address: _____

Owner: _____

Phone: _____ Contact Person: _____

Property Owner: _____

Property Address: _____

Application is hereby made for a revocable permit to install and maintain an **awning** over a public sidewalk in accordance with Chapter 76 of the City of Salem Revised Code. The encroachment shall comply with all applicable Codes of the City of Salem including those with regard to structural safety, traffic, sanitation and land use, and fire requirements. The placing of the awning in a portion of the aforesaid public right-of-way does not give Licensee or anyone else any permanent right to its continued use or occupancy of the right-of-way for such purpose. This license is revocable and when requested to do so by the Public Works Director, the Licensee, at the Licensee's own expense, will remove the awning from the right-of-way. Upon failure to do so, the Public Works Director may cause removal of the awning at the cost and expense of the Licensee.

Items to be included:

Map of the awning including building locations, right-of-way, and other structures.

Proof of insurance.

Additional comments or requirements: _____

_____ Initial _____ Date _____

I agree to the above-mentioned requirements in their entirety. I shall hold the City of Salem, its officers, agents, and employees free and harmless from any claims for damages to persons or property including legal fees and costs of defending any actions or suits thereon, including any appeals therefrom, which may result from the granting of this permit. Also I agree to maintain in good order the awning within the right-of-way.

Applicant Signature: _____ Date: _____
Owner of Property

Approved By: _____ Date: _____
Department of Public Works

Check \$ _____ Check # _____ Cash \$ _____ Rec'd. ____ / ____ / ____ By _____