



# TARRANT COUNTY ENGINEERING SERVICES

200 Taylor Street, Ste. 305 | Fort Worth, TX 76196 | 817-884-1250 | [www.tarrantcountytx.gov](http://www.tarrantcountytx.gov)

## RIGHT-OF-WAY ENCROACHMENT PERMIT APPLICATION

### GENERAL INFORMATION *(check all that apply)*

**IMPORTANT:** PUBLIC UTILITIES MUST COMPLETE SEPARATE UTILITY PERMIT APPLICATION.

#### Construction / Installation of:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Residential Driveway * | <input type="checkbox"/> Subdivision Entrance*  | <input type="checkbox"/> Mailbox                      |
| <input type="checkbox"/> Commercial Driveway*   | <input type="checkbox"/> Irrigation System      | <input type="checkbox"/> Culvert*; Size desired _____ |
| <input type="checkbox"/> Driveway Extension *   | <input type="checkbox"/> Decorative Landscaping | <input type="checkbox"/> Other Encroachment _____     |
| <input type="checkbox"/> Walkway / Sidewalk*    | <input type="checkbox"/> Sod                    |   |

**IMPORTANT:** FOR PERMANENT CONNECTIONS TO A COUNTY ROAD OR RIGHT-OF-WAY, NOTIFY INSPECTOR SHANE RHODES, (682) 249-8322, AT LEAST 24-48 HOURS PRIOR TO CONSTRUCTION FOR ONSITE MEETING AND INSPECTION.

### PROPERTY INFORMATION

Site Address / Proposed Location: \_\_\_\_\_

Description of Proposed Encroachment: \* \_\_\_\_\_

*\*Add Attachments as necessary*

Will you be performing construction that will be disturbing one (1) acre or more of earth? ☐ Yes ☐ No

### APPLICANT & OWNER INFORMATION

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Main Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Property Owner Name *(if different from Applicant)*: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Main Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Preferred Method of Contact: ☐ Phone ☐ Email

### OWNER'S CONSENT *(if applicable)*

If Applicant is not the Property Owner:

I hereby designate \_\_\_\_\_ *(applicant above)* to act as my agent for submittal, processing, representation, and/or presentation of this application. The designee shall be the primary contact person for this application.

### OWNER'S SIGNATURE

I hereby certify I am the owner of the property and certify that the information provided within this application is true and correct. By signing below, I agree that I will comply with all related Tarrant County regulations relating to right-of-way encroachment as adopted by the Commissioners Court and understand that the permit application is subject to approval by the Tarrant County Engineering Services Department.

Owner's Printed Name \_\_\_\_\_ Owner's Signature \_\_\_\_\_ Date: \_\_\_\_\_

### ENGINEERING SERVICES DEPARTMENT USE ONLY

Received Date: \_\_\_\_\_ Approval Date: \_\_\_\_\_ Precinct: \_\_\_\_\_

Permit Number: \_\_\_\_\_ Approved for Tarrant County by: \_\_\_\_\_