

# SAN FRANCISCO BAY AREA RAPID TRANSIT DISTRICT



## APPLICATION FOR PERMIT OR PLAN REVIEW (CONSTRUCTION)

Date: \_\_\_\_\_

For BART use only

Attention: Manager,  
Real Estate and Property Development Department

**PERMIT No.**

Application is made for permission to perform the following in the BART Right of Way:

### Check all that applies:

- ☐ Excavate
- ☐ Construct Temporary Improvement
- ☐ Construction Permanent improvement
- ☐ Permit to \_\_\_\_\_

### Submitted Document

- ☐ Drawings – 6 sets (11x17 preferred)
- ☐ Plans and Specs. – 6 sets
- ☐ others \_\_\_\_\_ (6 sets)

Start Date \_\_\_\_\_

End Date \_\_\_\_\_

Estimated Duration \_\_\_\_\_

Detailed scope of work (describe in details all work requested for permit): \_\_\_\_\_

List/Describe type of Equipment to be used: \_\_\_\_\_

Approximate cost of work in the permit area \$ \_\_\_\_\_

### Type of construction (check all that applies)

#### Type of Pipe

☐ Underground

☐ Surface

#### Excavation

☐ Length \_\_\_\_\_

☐ Width \_\_\_\_\_

☐ Depth \_\_\_\_\_

#### Conduit

☐ Type of Conduit \_\_\_\_\_

☐ No. of Ducts \_\_\_\_\_

☐ Buried Cable \_\_\_\_\_

☐ Others \_\_\_\_\_

☐ Surface type to be disturbed (if any) \_\_\_\_\_

Method of work: \_\_\_\_\_

Is the proposed work in the BART operating envelope? ☐ Yes ☐ No

Is the proposed Permit Area within 50 feet (Vertical or Horizontal) of Trackway? ☐ Yes ☐ No

If yes to any of the above, evidence of Railroad Protective Liability coverage may be required.

Applicant agrees to submit the As-built drawings (if required) after final inspection and sign-off. Failure to submit As-built may result in forfeiture of refundable deposit. Please allow 4 to 6 weeks for processing this application. Expect refundable deposit about 30 days after sign-off

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## Environmental Review

Specify any review for CEQA \_\_\_\_\_

Identify any document certification \_\_\_\_\_

Project Approval Date \_\_\_\_\_

Specify any change to existing landscape or irrigation \_\_\_\_\_

Will any excavated material be transported off of Permit Area ☐ Yes ☐ No

Does the proposed work involve fuel or known hazardous material on BART premises? ☐ Yes ☐ No

If yes, please specify and/or explain (Including any fuel storage capacity).

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Name of Applicant ( print company or agency) \_\_\_\_\_

Joint construction applicant \_\_\_\_\_

Address (Print) \_\_\_\_\_

Address (Print) \_\_\_\_\_

By (authorized signature) \_\_\_\_\_

Phone \_\_\_\_\_

By (authorized signature) \_\_\_\_\_

Phone \_\_\_\_\_

Name & Title (Print) \_\_\_\_\_

Name & Title (Print) \_\_\_\_\_

## For official use only

Permit No. \_\_\_\_\_

Date Issued: \_\_\_\_\_

Work Order No. \_\_\_\_\_

### Reviewed by

ROW Management \_\_\_\_\_

Traction Power \_\_\_\_\_

Application receipt date: \_\_\_\_\_

Mechanical Engineering \_\_\_\_\_

Safety \_\_\_\_\_

Refundable deposit \_\_\_\_\_

Civil/ Engineering \_\_\_\_\_

Engineering Liaison \_\_\_\_\_

Completion date \_\_\_\_\_

Electrical Engineering \_\_\_\_\_

Field. Management \_\_\_\_\_

As-built submittal date \_\_\_\_\_

Electrical Engineering \_\_\_\_\_

Insurance Department. \_\_\_\_\_

Deposit Return Date \_\_\_\_\_

As-Built Drawings required ☐ Yes ☐ No

Location: \_\_\_\_\_ Inspector/ Safety Monitor's name \_\_\_\_\_

Line \_\_\_\_\_

Mile Post \_\_\_\_\_ Inspector/Safety Monitor Sign-off \_\_\_\_\_

Date: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

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