CITY OF SANTA BARBARA
PUBLIC WORKS DEPARTMENT

LOOKING GOOD SANTA BARBARA
ADOPT-A-BLOCK PERMIT APPLICATION

Permit No. ______________________

Personal Information Notice: Pursuant to Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code Sections 1798, et. Seq.) notice is hereby given for the request of personal information by this form. The requested personal information is voluntary. The principle purpose of this voluntary information is to facilitate this Adopt-A-Block Permit Application. The failure to provide all or any part of the requested information may delay processing of this form. No disclosure of personal information will be made unless permissible under Article 6, Section 1798-17 of the IPA of 1977. Each individual has the right upon request and proper identification, to inspect all personal information in any record maintained on the individual by an identifying particular. Direct any inquiries on information maintenance to your Adopt-A-Block Coordinator.

PERMISSION IS REQUESTED TO ENCROACH ON THE CITY OF SANTA BARBARA STREETS RIGHT OF WAY AS FOLLOWS

Complete all items. NA if not applicable. Application is not complete until all required attachments are included.

APPLICANT INFORMATION:

Organization or Applicant: ____________________________________________________________

Address ________________________________________________________________

City, State & Zip Code ____________________________________________________________

Phone Number ___________________________ Date of Application ______________________

E-mail Address ________________________________________________________________

LOCATION INFORMATION:

Street Name ___________________________ Cross Street Begin ___________________________

Street Number from _____________________ Street Number to ________________________

Portion of Right of Way: _____ Roadside _____ Other (describe): ______________________

WORK INFORMATION:

To Be Performed By: Volunteers ______ Own Forces____ Contract Forces____

Type of Work: Litter Removal ______ Graffiti Abatement____ General Clean-Up____

Other: ______ describe: __________________________________________________________

Estimated Starting Date: ___________________________ Estimated Completion Date: __________

AUTHORIZED SIGNATURE: THE UNDERSIGNED AGREES THAT THE WORK WILL BE DONE IN ACCORDANCE WITH CITY OF SANTA BARBARA RULES AND REGULATIONS AND SUBJECT TO INSPECTION AND APPROVAL.

PERMITTEE: ______________________________ PRINT NAME: _________________________

APPROVAL: ______________________________ TITLE: ______________________________

Please fill out, sign & return the first two pages in the enclosed envelope. THANK YOU