

Entrance/ Gate Application

Date: ___/___/_____

Permit #: G _____

Company Name: _____

Company Address: _____

Lessee & Lessor Names & Addresses:

Name	Address	City, State	Zip

Contact person(s) and contact numbers: (Include Emergency Contact Info)

Contact Name	Phone	Emergency

Detailed reason for Entrance/Gate. Include type of Business/Activities to be conducted on site, hours of operations, and any additional details (use additional paper if necessary).

Is application for a contiguous/ multiple landowner use landowner's entrance? Yes No

Is application for a District perimeter property landowner entrance (i.e. S.R. 60)? Yes No

What type of gate will be used? _____

Gate must include locking device(s) and appropriate security fencing to prohibit unauthorized vehicular and pedestrian traffic. SJID shall be allowed to put a lock within your lock (preferred), to allow SJID access as necessary, or alternately SJID shall be provided with an adequate number of keys and/or the lock combination.

*****Attach** detailed drawing(s) for gate denoting type of metal material to be used and any additional drawing for security details.

Gate Location: Gate **cannot** be placed on SJID property; it **must** be on the landowner's property.

*****Attach** map of sufficient detail to this application. Location of the gate must be indicated.

Gates are only to be unlocked to allow authorized traffic immediate ingress or egress.

By signature below, the applicant warrants and represents to SJID that the applicant assumes all risks of loss or damage, and shall save and hold harmless SJID from any expenses, loss, damage, or claim in regard thereto and SJID assumes and shall have no liability in connection therewith including without limitations, attorneys' fees, fines and penalties.

Applicant's Name (Print): _____

Applicant's Signature: _____

Applicant Title: _____

SJID Administrator Approval: _____ Date: ___/___/20___
(required)

SJID Operating Committee Approval: _____ Date: ___/___/20___
(when necessary)

SJID Board of Supervisors Approval: _____ Date: ___/___/20___
(when necessary)
