

MENDOCINO COUNTY DEPARTMENT OF TRANSPORTATION  
ADOPT-A-ROAD PERMIT APPLICATION

PERMIT NUMBER	DATE OF APPLICATION
COUNTY RD NO	MILEPOST (BEGINNING)

**PERSONAL INFORMATION NOTICE**  
Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practice Act (Civil Code 1798, et seq.) notice is hereby given for the request of personal information by this form. The requested information is voluntary. The principle purpose of the voluntary information is to facilitate this Adopt-a-Road 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, 1798.17 of the IPA of 1977. Each individual has the right upon request and proper identification, to inspect information in any record maintained on the individual by an identifying particular. Direct any inquiries on information maintenance to your IPA Coordinator.

FOR COUNTY USE

PERMISSION IS REQUESTED TO ENCROACH ON THE COUNTY HIGHWAY RIGHT OF WAY AS FOLLOWS:  
Complete all items, use N/A if not applicable  
Application is not complete until all required attachments are included.

<b>APPLICANT INFORMATION</b>	ORGANIZATION OR APPLICANT	
	NAME OF RESPONSIBLE PERSON	
	ADDRESS (MAILING)	
	CITY, STATE, ZIP CODE	
	TELEPHONE NUMBER	
<b>LOCATION INFORMATION</b>	GENERAL LOCATION	
	ROAD	FROM MILEPOST TO MILEPOST
	NEAREST CROSS STREET	
	PORTION OF RIGHT OF WAY <input type="checkbox"/> ROADSIDE <input type="checkbox"/> OTHER (DESCRIBE BELOW)	
<b>WORK INFORMATION</b>	TO BE PERFORMED BY <input type="checkbox"/> VOLUNTEERS <input type="checkbox"/> OWN FORCES <input type="checkbox"/> CONTRACT FORCES	
	TYPE OF WORK <input type="checkbox"/> LITTER REMOVAL <input type="checkbox"/> WILDFLOWER PLANTING <input type="checkbox"/> OTHER <input type="checkbox"/> SEEDLING TREE PLANTING	
	ESTIMATED STARTING DATE	NOTE: PERMIT EXPIRES TWO (2) YEARS AFTER ISSUE DATE.

USE THIS SPACE FOR REMARKS:

**AUTHORIZED SIGNATURE** THE UNDERSIGNED AGREES THAT THE WORK WILL BE DONE IN ACCORDANCE WITH PUBLIC RULES AND REGULATIONS AND SUBJECT TO INSPECTION AND APPROVAL

AUTHORIZED SIGNATURE

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PRINTED NAME	TITLE
DAYTIME PHONE NUMBER	EMERGENCY PHONE NUMBER

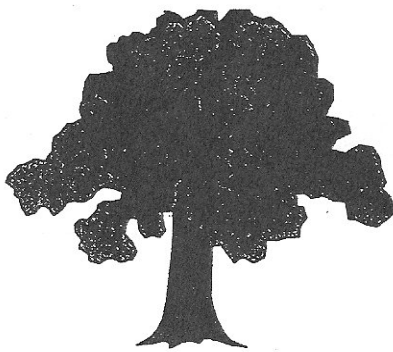
Did you....  
Complete all sections of the application?  
Sign the application?  
Add postage?

Detach application form.  
Fold, tape closed, add postage, mail.

*Fold here first*

PLACE  
STAMP  
HERE

COUNTY OF MENDOCINO  
DEPARTMENT OF TRANSPORTATION  
340 LAKE MENDOCINO DRIVE  
UKIAH, CA 95482-9432



ADOPT-A-ROAD