



Permanent
ENCROACHMENT APPLICATION

ORDINANCE #13066

12456

PERMANENT *X*

TEMPORARY

APPLICATION DATE *3/16/2020*

PERMIT NO. _____

DATE ISSUED _____

FEE PAID _____

INFORMATION TO BE FAXED TO THE ENGINEERING DEPARTMENT AT (610) 437-7614
PLEASE PRINT OR TYPE CLEARLY WITH BLUE OR BLACK INK

ADDRESS OF ENCROACHMENT: Various (Please see attached)

TIME PERIOD APPLIED FOR: Permanent

TYPE OF ENCROACHMENT: Meter Kiosk Installation

IF DUMPSTER OR SCAFFOLDING: N/A

NAME OF SUPPLIER: N/A PHONE: _____

ADDRESS: N/A

NAME OF PROPERTY OWNER: Allentown Parking Authority PHONE: 610-841-9090

ADDRESS: 603 W. Linden Street Allentown, PA 18101

NAME OF APPLICANT: Richard A. Young, P.E. PHONE: 610-841-8822

ADDRESS: 603 W. Linden Street Allentown, PA 18101

APPLICANTS SIGNATURE: *Richard A. Young*

ALL APPLICATION TO BE ACCOMPANIED BY A MEASURE SKETCH BELOW



ROUTING SHEET

BUREAU OF DIVISION	DATE REC'D	DATE REVIEW COMPLETED	DATE APPROVED	*DATE REJECTED
HARB DOK	3/19/2020	3/19/2020	3/19/2020	
ENG. KS	3/16/2020	3/17/2020	3/17/2020 *	
INSP. ICS	3/19/2020	3/19/2020	3/19/2020 ^{RA} *	
TRAFFIC TK	4/8/2020	4/8/2020	4/8/2020 (K)	
OTHER FRA	3/18/2020	3/18/2020	3/18/2020	

Upon completion of review by those Bureaus/Divisions/Agencies checked above, return application to the Director of Code Enforcement (Building Standards and Safety – Inspection Division). If rejected Manager of Bureau/Division/Agency is to attach memo explaining reason(s).

If rejected or not permitted in accordance with the Ordinance, forward to the City Clerk for action by City Council.

✓ Approved

 Rejected

Craig Kessinger SAE
Director, Community Development or Designee

4/24/20
Date

* Needs permanent encroachment with approval from Council since the kiosk is more than 1/3 into the ROW. All locations must be walk with a City Representative for final locations.

RA Needs Plans & Permits for Building Standards.

(*) CONDUCT SITE WALK-THRU WITH THE CITY REPRESENTATIVE FOR FINAL LOCATION APPROVAL.

(*) MAP PAGE 7 OF 20 AND 8 OF 20 LOCATIONS ARE NOT APPROVED BECAUSE OF FUTURE TRAFFIC IMPROVEMENT PROJECT.



CERTIFICATE OF LIABILITY INSURANCE

ALLEN-3

OP ID: MDJ

DATE (MM/DD/YYYY)

02/26/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Brown & Brown of the LV 3001 Emrick Blvd, Suite 120 Bethlehem, PA 18020 Joe Moran	CONTACT NAME:	
	PHONE (A/C, No, Ext): 610-974-9490	FAX (A/C, No): 610-974-9791
	E-MAIL ADDRESS: djoblon@bbinslv.com	
INSURED Allentown Parking Authority Connie Abercrombie 603 W Linden Street Allentown, PA 18101	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Westfield Insurance Company	
	INSURER B: Key Risk Insurance	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	
	NAIC #	
	24112	
	10885	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			TRA4848708	06/30/2019	06/30/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Emp Ben. \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			TRA4848708	06/30/2019	06/30/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			TRA4848708	06/30/2019	06/30/2020	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	KEY0137408	06/30/2019	06/30/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

City of Allentown is additional insured on the general liability per attached CG2012

CERTIFICATE HOLDER

ALLENTOWN

City of Allentown
435 Hamilton Street
Allentown, PA 18101

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE