

INSTRUCTIONS FOR FILING A

COVENANT OF EASEMENT APPLICATION

INSTRUCTIONS

Please complete the attached application and submit the following documents at the time of the appointment:

1. **1 original and 2 copies** of the following: *(Prepared by a Licensed Land Surveyor or Civil Engineer authorized to practice land surveying pursuant to the Professional Land Surveyor's Act)*
 - **Plot Plan.** A legible plot plan showing the dimensions of the existing and proposed parcel boundaries, building envelopes and setbacks. Boundaries for all parcels proposed to be reconfigured are to be shown in their entirety. If more than one sheet is needed, a key map showing all subject parcels is required. The plan should be drawn to scale, dated and titled on 8 1/2" x 11" size paper. (See "Example Plat")
2. Draft Covenant of Easement per Template.
3. An Affidavit of Ownership form (included in this application). All signatures must be **notarized**. A notary form must be attached with this application. **wet/original signatures required. Digital or scanned copy of signatures will NOT be accepted.**
4. **Fees.** An application fee (see application fee schedule).

EXAMPLE

Recording Requested By:

When Recorded Send To:

City of San Jose
Department of Planning, Building & Code Enforcement
Planning Division
200 East Santa Clara Street
San Jose, CA 95113
Attn: [planner name]

Project No:

APN(s):

COVENANT OF EASEMENT

(Government Code sec. 65871;
SJMC Ch. 20.110, Part 1)

WHEREAS, [name of property owner(s)], a [type of entity] (“OWNER”) is the owner of all that real property described in Exhibit “A” attached hereto and incorporated herein by reference (“PROPERTY”); and

WHEREAS, as a condition of approval of [specify type, number, and date of approval of land use permit] affecting the PROPERTY the CITY OF SAN JOSE, a municipal corporation (“CITY”) has required that a non exclusive easement be provided for [specify which apply: parking, ingress, egress, emergency access, light and air access, landscaping, open space purposes, and/or storm water treatment access, operation or maintenance] pursuant to the provisions of Government Code sections 65870-65875 and Part 1 of Chapter 20.110 of the San Jose Municipal Code; and

WHEREAS, OWNER intends to comply with the above-described condition of approval by creating the required easement on the PROPERTY.

NOW, THEREFORE, OWNER grants to the CITY a non-exclusive easement for [parking, ingress, egress, emergency access, light and air access, landscaping, open space purposes, and/or storm water treatment access, operation or maintenance] on the PROPERTY described herein in Exhibit “A.” Said easement is more particularly described [all of the Property described in Exhibit “A” (if involves entire parcel) or as described in Exhibit “B” (legal description of easement if involves only a portion of the parcel)].

This Covenant of Easement shall be recorded in the office of the Santa Clara County Recorder. Upon recordation, the burdens of the Covenant shall be binding upon all successors in interest to the real PROPERTY described in Exhibit “A.”

EXAMPLE
(continue)

This Covenant of Easement shall not be modified or released without the prior approval of the CITY in the manner required by applicable law.

OWNER:

[Print name and title]

[Print name and title]

[All Owners signatures must be notarized. Proof of authorization must be provided where representatives are signing on behalf of any Owner.]

CITY:

Director of Planning, Building & Code Enforcement

[Attach all exhibits and completed City Certificate of Acceptance form]

COVENANT OF EASEMENT APPLICATION

TO BE COMPLETED BY PLANNING STAFF				
FILE NUMBER ET	COUNCIL DISTRICT	ZONING	QUAD #	RECEIPT #: _____
LOCATION				AMOUNT: _____
				DATE: _____
				BY: _____

TO BE COMPLETED BY APPLICANT (PLEASE PRINT OR TYPE)	
ASSESSOR'S PARCEL NUMBER(S)	EXISTING USE OF PROPERTY:

PROPOSED EASEMENTS

The name, address, license number and telephone number of the Licensed Land Surveyor or Civil Engineer who prepared the attached Exhibit "A" is as follows:		
PRINT NAME OF SURVEYOR OR ENGINEER	NAME OF FIRM, IF APPLICABLE	LICENSE #
ADDRESS	CITY	STATE ZIP CODE
DAYTIME TELEPHONE # ()	FAX # ()	E-MAIL ADDRESS

CONTACT PERSON (if other than the Engineer or Land Surveyor listed above)		
PRINT NAME OF CONTACT PERSON	NAME OF FIRM, IF APPLICABLE	
ADDRESS	CITY	STATE ZIP CODE
DAYTIME TELEPHONE # ()	FAX # ()	E-MAIL ADDRESS

This application is accepted by APPOINTMENT ONLY. To arrange an appointment, please visit the Planning Division's website: <http://www.sanjoseca.gov/index.aspx?nid=1725>. For assistance, call (408) 535-3555

AFFIDAVIT OF OWNERSHIP

That I(we) am(are) the owner(s) of the property for which a Covenant of Easement approval is sought or have the lawful Power of Attorney therefore. All signatures must be notarized. Please attach the notary form.			
PRINT NAME OF PROPERTY OWNER & APN		DAYTIME TELEPHONE # ()	
ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE <i>wet/original signatures required. Digital or scanned copy of signatures will NOT be accepted.</i>		DATE	
PRINT NAME OF PROPERTY OWNER & APN		DAYTIME TELEPHONE # ()	
ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE <i>wet/original signature required. Digital or scanned copy of the signature will NOT be accepted.</i>		DATE	
PRINT NAME OF PROPERTY OWNER & APN		DAYTIME TELEPHONE # ()	
ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE <i>wet/original signature required. Digital or scanned copy of the signature will NOT be accepted.</i>		DATE	
If signing with Power of Attorney, a copy of the document giving you Power of Attorney must be attached to this application. If there are additional property owners, please attach a separate sheet to provide the above information.			

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