

Western Pennsylvania Conservancy



November 5, 2019

Karina Ricks, Director
Department of Mobility & Infrastructure
611 Second Avenue
Pittsburgh, PA 15219

RE: Encroachment Permit, Rain Garden at Lincoln Avenue & Frankstown Avenue
Larimer Neighborhood of Pittsburgh

Dear Ms. Ricks,

I am writing this letter to you to request your approval of a City of Pittsburgh Encroachment Permit related to a proposed rain garden at Lincoln Avenue and Frankstown Avenue, located in the Larimer neighborhood of Pittsburgh. The project area is presently vacant – with ownership of the lots divided between the City of Pittsburgh and partially by the Pittsburgh Public Schools. The Western Pennsylvania Conservancy has been a partner with these entities since 1995, maintaining the site as a community garden, and regularly caring for it with frequent engagement from the community and the Lincoln PreK-5 School.

This new rain garden project is also sponsored by the Western Pennsylvania Conservancy and has been designed to simultaneously serve as a beautification strategy for the vacant lot, as a stormwater management best practice, and as an educational resource for the PreK-5 school who has direct access to the property. We request an encroachment permit specifically for the proposed trench drains on the inlet and outlet sides of the rain garden, which cross the sidewalks on Lincoln Avenue and Frankstown Avenue. These trench drains are a necessary design component to permit safe conveyance of storm runoff from Lincoln Avenue to the rain gardens, as well as for direct discharge of excess runoff back to the Frankstown Avenue curb and gutter system.

We have included photos for your review. Please note that the Western Pennsylvania Conservancy is working to complete the construction of the rain garden this year, prior to the winter weather commencing. As such, any efforts you could provide to help expedite this permit would be greatly appreciated. Thank you very much.

Kind Regards,

Art DeMeo

Director, Community Gardens & Greenspace Department
Western Pennsylvania Conservancy



CITY OF PITTSBURGH

Department of Mobility and Infrastructure

William Peduto, Mayor

Karina Ricks, Director

ENCROACHMENTS

The Following items are necessary in order to process any encroachment:

A letter addressed to the following: Karina Ricks, Director
Department of Mobility & Infrastructure
611 Second Avenue
Pittsburgh PA 15219

A check for \$150.00, payable to the "Treasurer, City of Pittsburgh". PLEASE DO NOT DATE THE CHECK DUE TO PROLONG PROCESS. THANK YOU.

ENCROACHMENTS: After receiving the information, we will do a review and verification then send the resolution to City Council. When this legislation is passed, we will send you a copy along with an acceptance certificate that must be signed and returned to this office. In addition, we will need an insurance certificate naming the City of Pittsburgh as an additional insured party, for the amounts listed in the encroachment once the legislation is passed.

All construction must be in compliance with City specifications.
All material for construction must comply with City standards and must be itemized in the letter of request to the Director of the Department of Public Works.
After receiving the information, the review process will begin. This process includes inspection by the administrator, field inspection by inspector, final approvals by Assistant Director's and Directors Office, and finally sent to Council for their approval.
These requests take an extensive amount of research and review, and we thank you for your patience.

Please submit all completed forms to:
Jennifer Massacci
611 Second Ave
Pittsburgh, Pa 15219
jennifer.massacci@pittsburghpa.gov



CITY OF PITTSBURGH

Department of Mobility and Infrastructure

William Peduto, Mayor

Karina Ricks, Director

Application for an Encroachment on City Dedicated Right-Of-Way

Before application can be filed, anyone affiliated with this application must submit a tax & fine clearance statement. This statement must be signed off by all listed in the attached Ordinance. This information request is from City Code 416.03C. (see page 3)

Date 10/29/2019

Name Western Pennsylvania Conservancy

Address 800 Waterfront Drive, Pittsburgh, PA 15222

Home Phone Number: _____ Business Phone Number: 412-288-2777

Pager Number: _____ Cell Phone Number: _____

Location of Proposed Encroachment: Lot#125-A-98 Intersection of Frankstown Ave & Lincoln Ave

Ward: 12 Council District: 9

Lot and Block What is the properties zoning code? LNC

Is the existing right-of-way, a street or a sidewalk? YES

Width of Existing Right-of-Way (sidewalk or street): _____ (Before encroachment)

12 FT. SIDEWALK AT FRANKSTOWN AVE. 8 FT SIDEWALK AT LINCOLN

Length of Existing Right-of-Way (sidewalk or street): 435 FT AROUND THE LOT

Width of Proposed Encroachment: 12 FT. SIDEWALK AT FRANKSTOWN AVE. 8 FT SIDEWALK AT LINCOLN

Length of Proposed Encroachment: 16 FT AT FRANKSTOWN. 2 FT AT LINCOLN.

Reason for application: Installation of rain garden at subject property requires trench drain crossing sidewalks on Lincoln and Frankstown to safely convey runoff

*****PLEASE ATTACH ALL ADDITIONAL INFORMATION*****



CITY OF PITTSBURGH

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Karina Ricks, Director

Upon completion of the building, how many people will the structure accommodate? n/a

As a result of this encroachment, will the project create jobs and if so how many? no

I have enclosed a picture or drawing of the proposed structure to be placed on the site of the encroached property. (No Larger than 8" X 11") [Yes. See photo exhibits, attached.](#)

If there are abutting property owners, *I have enclosed the petition (attached at the end of the application)* received at the time of the application containing signatures of all adjacent

property owners. [The abutting property owners are the City and the Pittsburgh Public Schools. Both are engaged in the project through Western Penn. Conservancy. Petition attached.](#)

This petition has been *witnessed* and *notarized*. [Yes](#)

I have enclosed a copy of the specifications. (No Larger than 8" X 11") [Yes](#)

I have enclosed a copy of a survey or plot plan of the property. [Yes](#)

REMEMBER TO ATTACH ALL ADDITIONAL INFORMATION. (*ie.:* Letter to the

Director, Insurance forms (these are due when the encroachment is approved), maps, specs, drawings, petitions, a check for \$150.00 payable to Treasurer City of Pittsburgh).

For Office Use:

Check for \$150.00 _____ Received Plot Plan or Survey _____

Received Required Insurance _____ Petition signed and notarized _____

Received detailed map of proposed encroachment _____

Received drawing or picture of completed project _____

Received picture of proposed encroached property _____

Received signed, notarized Petition, if there are abutting property owners _____

All tax information in compliance _____ delinquent _____

NOTARIZED PETITION
CITY OF PITTSBURGH ENCROACHMENT PERMIT REQUIREMENT

I, LYNDA WRENN, AS AN AUTHORIZED REPRESENTATIVE OF SCHOOL DISTRICT OF PITTSBURGH DO HEREBY ATTEST THAT I AM AWARE OF THE NEW RAIN GARDEN AND SIDEWALK IMPROVEMENTS PROPOSED BY WESTERN PENNSYLVANIA CONSERVANCY, LOCATED AT THE VACANT LOT AT THE INTERSECTION OF FRANKSTOWN AVENUE AND LINCOLN AVENUE IN THE LARIMER NEIGHBORHOOD OF PITTSBURGH, AND HAVE NO OBJECTIONS OR CONCERNS RELATED TO THE REQUIRED CITY OF PITTSBURGH ENCROACHMENT PERMIT.

AS REQUIRED, THIS PETITION IS SIGNED BELOW BY BOTH THE ABUTTING PROPERTY OWNER AND THE PERMIT APPLICANT.

PROPERTY OWNER:

SIGNATURE Lynda Wrenn

DATE 11/7/19

App'd to the Form. Subscribed 11/5/19

ENCROACHMENT PERMIT APPLICANT:

SIGNATURE Cynthia Carr

DATE 11-8-2019

Don Tak

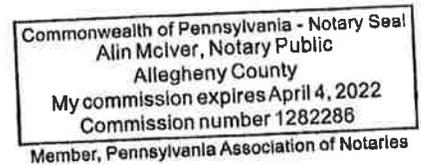
11-8-2019

NOTARY PUBLIC:

SIGNATURE Ali McIver

DATE 11-8-2019

(SEAL)





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/25/2019

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 have ADDITIONAL INSURED provisions or 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 Arthur J. Gallagher Risk Management Services, Inc. 210 Industrial Park Road Suite 130 Johnstown PA 15904	CONTACT NAME: Victor A. Dorazio PHONE (A/C No. Ext): 412-929-0393 E-MAIL ADDRESS: Victor_Dorazio@ajg.com	FAX (A/C, No):
	INSURER(S) AFFORDING COVERAGE	
INSURED Western PA Conservancy 800 Waterfront Drive Pittsburgh PA 15222-4718	INSURER A: Great Northern Insurance Company	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 450856139

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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	Y		36052076	6/24/2019	6/24/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	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				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

If the certificate holder is included as an Additional Insured, Form #CG7158, edition 01/14 applies.

City of Pittsburgh and Pittsburgh Public Schools are included as Additional Insured on the general liability policy, as per endorsement #CG7158, Ed. 01/14 with regards to the following Lot and block numbers for the garden as follows:

125-A-98
 125-1-94
 125-A-93
 125-A-99

See Attached...

CERTIFICATE HOLDER**CANCELLATION**

City of Pittsburgh
 Attn: Shelly Danko+Day
 200 Ross Street
 Pittsburgh PA 15219

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

Walter R. Syp

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ADDITIONAL REMARKS SCHEDULE

AGENCY Arthur J. Gallagher Risk Management Services, Inc.		NAMED INSURED Western PA Conservancy 800 Waterfront Drive Pittsburgh PA 15222-4718	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE	(Empty)	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

125-A-100
 125-A-92
 125-A-101

