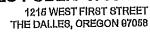
## CITY of THE DALLES PUBLIC WORKS







## SIDEWALK/STREET CLOSURE PERMIT

This application must be submitted at least five (5) days prior to the proposed sidewalk/street closure date. Applications may be submitted in person or mailed to the Public Works office at the address above or emailed to <a href="mailto:locality-dalles.or.us">locality-dalles.or.us</a>. Applicant agrees to comply with the provisions of the Charter, Ordinances, and Resolutions of the City of The Dalles pertaining to such closures; and with the instructions and requirements as listed below.

Please complete the entire form

Date: /( Applicant Name: Phone: Address: \ Contact Person Email Address: Sx Street - Attach Traffic Control Plan Type of Closure: ☐ Sidewalk – Attach Temporary Pedestrian Accessible Route Plan Location of Closure: to (Date/Time) Date of Closure: From (Date/Time) \_ Reason for Closure: INSTRUCTIONS/REQUIREMENTS: (To be completed by issuing agency) • Applicant must provide a Traffic Control Plan (TCP) for approval for all Street Closures. Traffic Control Plan should show proposed detour routes, signs, barricades, and traffic control devices. Applicant must provide a Temporary Pedestrian Accessible Route Plan (TPARP) for approval for all Sidewalk Closures. TPARP should show proposed accessible pedestrian detours, signs, barricades, and pedestrian delineation devices. • Applicant must notify Central Dispatch at the time of street closing and reopening. (541-298-5507) De Applicant shall place cones or languardes around clumps to. Appli y come to Pablic works and borrow cones or barricules on fuct adjacent business owners about pushing approved duration of permit. X Applicant shall not dostruct the travelving and allow access

for all vehicles and pedestrans using the badway.

THIS PERMIT WILL BE CONSIDERED A PUBLIC DOCUMENT. ALL INFORMATION ... SUBMITTED WILL BE ACCESSIBLE TO THE PUBLIC, IN ITS ENTIRETY, ON THE CITY'S WEBSITE.

## ACKNOWLEDGEMENT OF APPLICANT RESPONSIBILITY

The undersigned agrees to defend, indemnify and hold the City of The Dalles, its officers, agents and employees, harmless from and against all claims, liabilities, demands, damages and actions, of whatever form or nature, including but not limited to property damage, pedestrian accessibility, personal injury and death, together with costs and attorney fees incurred in defense thereof, arising from or relating in any way to the street or sidewalk closure authorized by this permit and the undersigned's activities in connection with this permit. If required as a condition of this permit, the undersigned shall name the City of The Dalles as additional insured and shall provide the City with a Certificate of such insurance that shall provide, among other things, that the policy may not be cancelled without prior notice to the City.

I understand and agree to the terms of this Sidewalk/Street Closure Permit.

Applicant Signature Signature Date Date Date Date Signature Date

Approval	Date
600	10/18/1
	10 14 1
1 AM	101911
101	16-19-18
	Approval  Approval