



CITY of THE DALLES PUBLIC WORKS

1215 WEST FIRST STREET
THE DALLES, OREGON 97050
(541) 296-5401

SIDEWALK/STREET CLOSURE PERMIT

This application must be submitted at least five (5) business 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 Jcorbin@ci.the-dalles.or.us. Applicant agrees to comply with the provisions of the Charter, Ordinances (2.24.060), Resolutions, and Policies of the City of The Dalles pertaining to such closures; and with the instructions and requirements as listed below.

Please complete the entire form

Applicant Name: Kevin Huxel

Date: 11-8-21

Address: 422 E 4th St

Phone: 541-296-5336

Contact/Responsible Person Kevin Huxel

Phone: _____

Email Address: Kevin.Huxel@gmail.com

Cell: 541-993-0110

TYPE OF CLOSURE (Check at least 1)

- | | |
|---|---|
| ☐ Street for Construction Work | ☐ Sidewalk for Construction Work |
| ☐ Street/Parking Lot for Event | ☐ Sidewalk for Event |
| ☒ Parking Lane for Dumpster | ☐ Other |

CLOSURE FROM 11-29-21 (Date/Time) TO 12-6-21 (Date/Time)

LOCATION/ADDRESS OF CLOSURE Laughlin St South of 4th St intersection

REASON FOR CLOSURE Dump box from Garbage Company Parked on Street

INSTRUCTIONS/REQUIREMENTS:

- Applicant **must** provide a Traffic Control Plan (TCP) for approval for all Street and Parking Lot 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. (See Standard Drawing TM844 for general TPARP examples)
- Applicant **must** notify Central Dispatch at the time of street closing and reopening. (541-298-5507)
- Applicant **must** notify adjacent property/business owners prior to closure.
- Applicant **must** provide proof of liability insurance with The City of The Dalles listed as co-insured if City Street/Parking Lot closure is for an event

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. Applicant for City Street or Parking Lot closures for events must provide a Certificate of General Liability Insurance with a minimum of \$1,000,000 coverage, with stated purpose of on the Certificate for the event and listing The City of The Dalles as a co-insured. Insurance is in addition to acknowledgement of responsibility and cannot be cancelled without prior notice to the City. In addition the Responsible Person listed on this permit shall remain on-site during the duration of the event and closure.

Failure of the applicant to meet the requirements of this permit, including following of the Traffic Control Plan and/or Temporary Pedestrian Accessible Route Plan, will result in a Stop Work Order and possible revocation of the permit.

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

Applicant Signature [Signature] Date 11-8-21

CITY USE ONLY

☒ THE DUMPSTER MUST NOT OBSTRUCT TRAFFIC AND ALLOW ENOUGH ROOM FOR TRAFFIC TO SAFELY GET BY.
☒ APPLICANT MUST PLACE CONES AT BEGINNING AND END OF CLOSURE. THE CONES CAN BE PICKED UP AT PUBLIC WORKS.

Receipt of Required Items

TCP for Street/Parking Lot Closure	☐ Attached	☐ Not Required
TPARP for Sidewalk Closure	☐ Attached	☒ Not Required
Certificate of General Liability	☐ Attached	☐ Not Required

RELATED PERMITS _____

ROUTING ORDER - PLEASE EXPEDITE

New property owner

Department	Approval	Date
Public Works - Transportation	<i>[Signature]</i>	11/15/2021
Public Works - ADA Coordinator	<i>[Signature]</i>	11/15/2021
Police Department	<i>[Signature]</i>	11/15/21
Human Resources - Risk Manager	<i>[Signature]</i>	11/15/21
City Manager	<i>[Signature]</i>	11/16/21

THIS PERMIT IS:

- ☒ APPROVED AND EXPIRES ON 12/7/21
- ☐ APPROVED WITH REVISIONS AND EXPIRES ON _____
- ☐ DENIED FOR FOLLOWING REASON: _____

Authorized by: [Signature] Title: CITY ENGINEER

Public Works to Notify Applicant of final decision

