



CITY OF THE DALLES PUBLIC WORKS

1215 WEST 1st STREET
THE DALLES, OREGON 97058
(541) 296-5401

Application Fee	\$10
Expedite Fee	\$25
Event Deployment Fee	\$50
A contractor work zone is not an event.	

SIDEWALK/STREET CLOSURE APPLICATION

In accordance with The Dalles [Municipal Code 2.24.060](#), the sidewalk/street closure permit application must be submitted at least seven (7) business days prior to the proposed closure date. The Public Works Department shall have seven days to process the application. Fee(s) must be paid in full before application will be processed. **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.**

Please download and save this form before filling it out.

Date of Application:

06/08/2023

Format: MM/DD/YYYY

Applicant First Name

Oregon Equipment Co. Inc.

Primary First Name

Applicant Last Name

Primary Last Name

Contact/Responsible Party

Ron Nelson

If the responsible party is not the applicant

Email:

ron@oregonequipment.com

Primary email address

Business Name:

Mailing Address:

1505 W 1st Street The Dalles

Phone:

(541) 296-2915

On-call emergency phone number

Other Phone:

Daytime phone number

For sidewalk closures a temporary pedestrian accessible route plan (TPARP) must be selected.

- View the TPARP advisory memorandum [here](#).
- View the TPARP options [here](#) and then select the type you will use.

Type of Closure:

- Street (TCP Required)
- Sidewalk (TPARP Required)
- City-Owned Parking Lot (TCP Required)
- Dumpster placed in the right-of-way
- Other (Describe below)

For sidewalk closures, select a type of Temporary Pedestrian Accessible Route Plan (TPARP):

- 1.a. Sidewalk diversion - Within roadway
- 1.b. Sidewalk diversion - Additional right-of-way
- 2. Sidewalk closure - Mid-block
- 3. Sidewalk closure - Corner

Left Lane and Parking area closure

Please describe other type of right-of-way closure

Location(s) of closure

Left/South lane and parking area in middle zone of East 100 block of Second Street.

Reason for closure (e.g. event, construction, etc.)

Construction: HVAC Replacement for Commercial Building.

Please write the addresses or sections of sidewalk/street for the requested closure.

Please describe the project or event for the requested closure.

Closure begin date

06/20/2023

Format: MM/DD/YYYY

Time

06:30

Closure end date

06/20/2023

Format: MM/DD/YYYY

Time

08:30

Sidewalk/Street Closure Fees

Fee(s) must be paid in full before application will be processed.

1. Application Fee: \$10.00
2. Expedited Fee (when application is turned in less than 5 days prior to the event): \$25.00
3. Event Deployment Fee (on for profit events which require use of City signs and barricades that staff deliver to event): \$50.00
A contractor work zone is not an event.

To pay by credit card, call the Public Works Department at (541) 296-5401.

To pay with a check or cash, mail or deliver to the City of The Dalles Public Works Department, 1215 West 1st Street, The Dalles, 97058 during business hours, weekdays 7:00 a.m. to 4:00 p.m.

Required Attachments

The applicant may be required to email one or more items to complete this application:

1. For street closures, applicants must attach a written and drawn **traffic control plan** that shows the safe and efficient movement of public traffic through or around a work/closure zone while protecting workers, incident responders, and equipment. The traffic control plan will be reviewed per the [Oregon Temporary Traffic Control Handbook](#).
2. Applicants for street or City-owned parking lot closures for events or construction work 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, 313 Court St. The Dalles, OR 97058 as a co-insured. Insurance is in addition to acknowledgement of responsibility and cannot be cancelled without prior notice to the City.

View the City's policy for insurance requirements [here](#). Read The Dalles Municipal Code 2.24.060 [here](#).

Acknowledgment of Applicant Responsibility

- I, the Applicant, agree to comply with the provisions of the City Charter, The Dalles Municipal Code (including TDMC 2.24.060), Resolutions, City policies connected with sidewalk and street closures, and with the requirements listed in this Application.
- I, the Applicant, agree to indemnify, defend, and hold harmless the City of The Dalles and its officers, agents, and employees, from and against all liability, loss, and costs (of whatever form or nature, including property damage, pedestrian accessibility, personal injury, and death) arising from or relating in any way to actions, suits, claims, or demands attributable in whole or in part to my (including my officers, agents, and employees) acts or omissions in the performance of activities connected with this Permit.
- I, the Applicant, certify I or the Responsible Party listed in this Application will notify adjacent property or business owners 72 hours prior to any closures authorized by this Permit.
- I, the Applicant, certify I or the Responsible Party listed in this Application shall remain on-site or be available for on-call emergencies for the duration of the Permitted event and closure.
- I, the Applicant, certify I or the Responsible Party listed in this Application will notify City Public Works Central Dispatch at the times of both closure and reopening by calling (541) 298-5507.

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.

By clicking submit and pasting or typing your name/signature in the signature line, you confirm you have read, understood, and affirmatively agree to be bound by the terms and conditions described.

Applicant Signature

Ron Nelson / Oregon Equipment Co. Inc.

Please save the form after signing. Then [click to email the form to publicworks@ci.the-dalles.or.us](mailto:publicworks@ci.the-dalles.or.us)

Receipt of Required Items

City Use Only

TCP for Street/Parking Lot Closure:	<input type="checkbox"/> Attached	<input type="checkbox"/> Not Required
TPARP for Sidewalk Closure:	<input checked="" type="checkbox"/> Attached	<input type="checkbox"/> Not Required
Certificate of General Liability:	<input checked="" type="checkbox"/> Attached	<input type="checkbox"/> Not Required
Payment Received:	<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card
	<input type="checkbox"/> Cash	

Record of Approvals

Michael Bosse Digitally signed by Michael Bosse
Date: 2023.06.08 14:04:39 -07'00'

Americans with Disabilities Act
Coordinator

Daniel Hunter Digitally signed by Daniel Hunter
Date: 2023.06.08 14:59:39 -07'00'

Human Resources/Risk
Director

David Mills Digitally signed by David Mills
Date: 2023.06.12 08:13:42 -07'00'

Transportation Division
Manager

6/21/23

Permit Expiration Date

6/8/23, 12:24 PM

116 E 2nd St - Google Maps

Google Maps 116 E 2nd St



Imagery ©2023 CNES / Airbus, Maxar Technologies, State of Oregon, Map data ©2023 Google 20 ft

sidewalk Closed Ahead + Detour Right

TPARP

Go g le Maps 116 E 2nd St



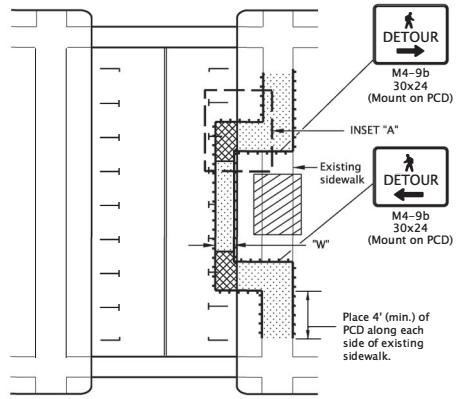
Imagery ©2023 CNES / Airbus, Maxar Technologies, State of Oregon, Map data ©2023 Google 20 ft

TCP

Merge Right

Left Lane Closed Ahead

Roadwork Ahead



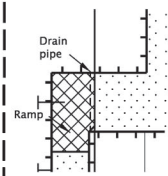
Within Roadway SIDEWALK DIVERSION

NOTES:

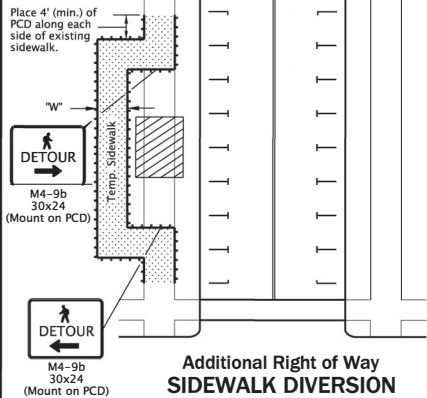
- Place or construct temp. sidewalk ramp, as needed.
- For roadways with a pre-construction posted speed of 40 mph or less.
- See inset "A" for Temp. Sidewalk Ramp details.
- "W" = 60", or, where 60" width cannot be maintained through the entire route, provide 48" min. width with 60" x 60" passing spaces every 200 ft.
- Use temporary ADA compliant surfaces to cross planter strips or other non-traversable surfaces.

NOTES:

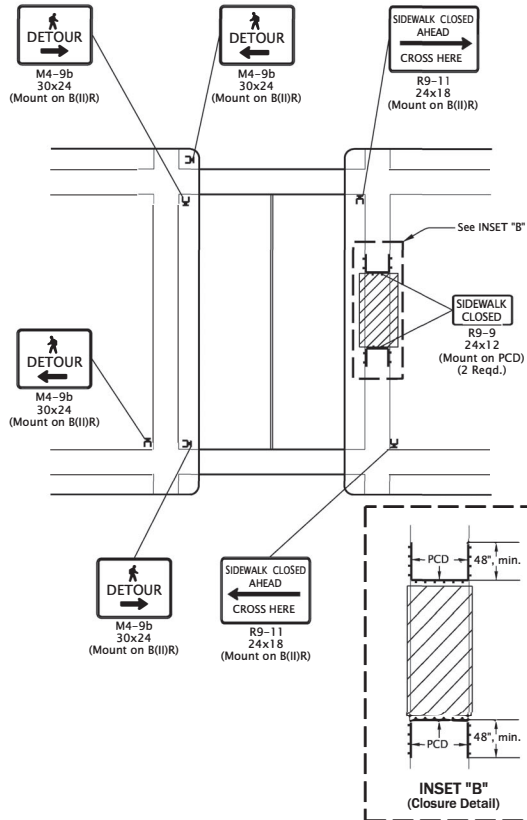
- Ramp size will vary. Ramp must meet ADA requirements incl. max design grade of 7.5% and max design cross slope of 1.5%.



INSET "A"
(Temp. Sidewalk Ramp)



Additional Right of Way SIDEWALK DIVERSION

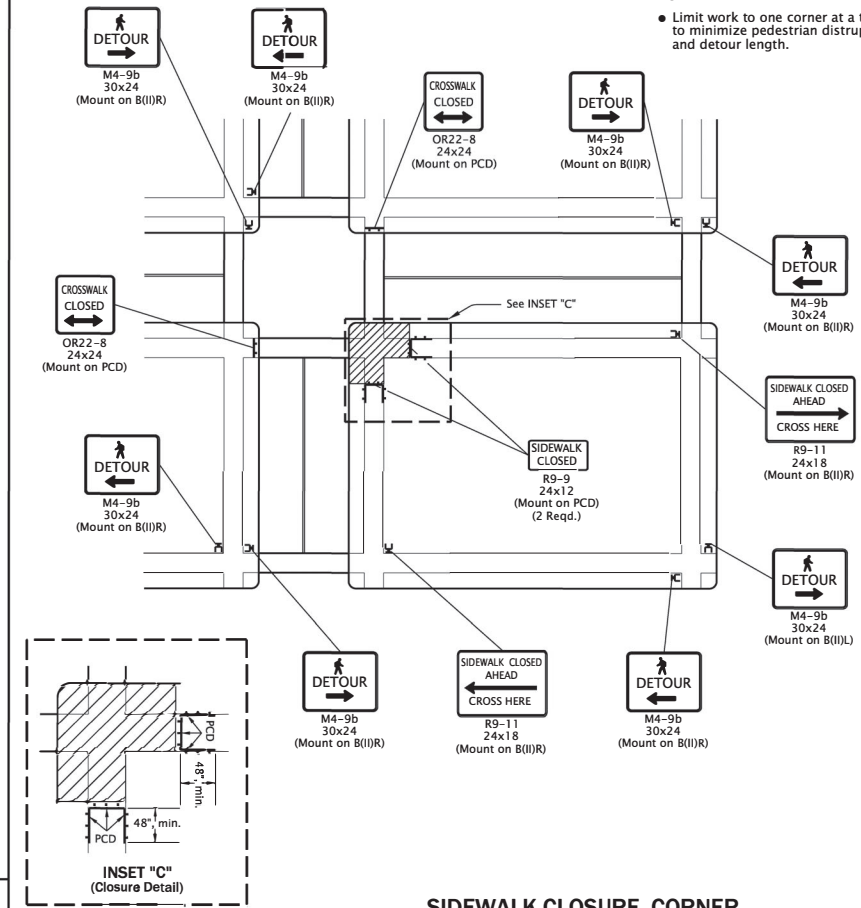


SIDEWALK CLOSURE, MIDBLOCK

GENERAL NOTES FOR ALL DETAILS:

- When closing or relocating crosswalks or other pedestrian facilities provide ADA compliant facilities. Include accessibility features consistent with existing pedestrian facilities by providing adequate slope transitions and surfacing.
- Provide non-slip, 60 inch minimum wide surface through entire pedestrian route. If not possible, provide 48" min. width with 60" x 60" passing spaces every 200 feet along the route.
- Only TCD for pedestrians are shown. Other devices may be necessary to control vehicular traffic.
- Stage work, as necessary, to provide a temporary pedestrian access route at all times. For roadways with no available detours, maintain one open sidewalk at all times.
- Minimize pedestrian out-of-direction travel.

- UNDER PEDESTRIAN TRAFFIC
- UNDER CONSTRUCTION
- PEDESTRIAN CHANNELIZING DEVICE (PCD)



SIDEWALK CLOSURE, CORNER

- NOTE:**
- Limit work to one corner at a time to minimize pedestrian disruption and detour length.

CALC. BOOK NO. --- N/A ---	SDR DATE --- 01-JUL-2020 ---
NOTE: All material and workmanship shall be in accordance with the current City of The Dalles Standard Specifications	
CITY OF THE DALLES STANDARD DRAWINGS	
TEMPORARY PEDESTRIAN ACCESSIBLE ROUTES	
2022	
DATE	REVISION DESCRIPTION

The selection and use of this Standard Drawing, while designed in accordance with generally accepted engineering principles and practices, is the sole responsibility of the user and should not be used without consulting a Registered Professional Engineer.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/07/2023

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 FEDERATED MUTUAL INSURANCE COMPANY HOME OFFICE: P.O. BOX 328 OWATONNA, MN 55060	CONTACT NAME: CLIENT CONTACT CENTER	
	PHONE (A/C, No, Ext): 888-333-4949	FAX (A/C, No): 507-446-4664
E-MAIL ADDRESS: CLIENTCONTACTCENTER@FEDINS.COM		
INSURED OREGON EQUIPMENT CO INC 1505 W 1ST ST THE DALLES, OR 97058-3501	386-109-3	INSURERS AFFORDING COVERAGE INSURER A: FEDERATED RESERVE INSURANCE COMPANY NAIC # 16024 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES CERTIFICATE NUMBER: 7 REVISION NUMBER: 0

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.

INSUR	TYPE OF INSURANCE	ADCL	ADJR	WOP	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:				9151744	04/01/2023	04/01/2024	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (E.A. ACCIDENT) \$100,000 MED EXP (Any one person) EXCLUDED PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS & COMPOP ACC \$2,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS OWNLY <input type="checkbox"/> NON-OWNED AUTOS ONLY				9151744	04/01/2023	04/01/2024	COMBINED SINGLE LIMIT (E.A. 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 RETENTION				9151745	04/01/2023	04/01/2024	EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000 PER STATUTE <input type="checkbox"/> OTHER
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below							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)
THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED SUBJECT TO THE CONDITIONS OF THE ADDITIONAL INSURED - OWNERS, LESSORS OR CONTRACTORS - AUTOMATIC STATUS WHEN REQUIRED IN CONSTRUCTION AGREEMENT WITH YOU ENDORSEMENT FOR GENERAL LIABILITY.

CERTIFICATE HOLDER 386-109-3 CITY OF THE DALLES OREGON 313 COURT ST THE DALLES, OR 97058-2111	CANCELLATION 7 0 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 
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City of The Dalles
 313 Court Street | PO Box 1790
 The Dalles, OR 97058
 (541) 296-5481

XBP Confirmation Number: 146443854

40 Col. Printer

▶ Transaction detail for payment to City of The Dalles. Date: 06/08/2023 - 2:37:37 PM MT

Transaction Number: 199143377
 Mastercard — XXXX-XXXX-XXXX-0664
 Status: Successful

Account #	Item	Quantity	Item Amount
	SidewalkStreet Closure Permit	1	\$10.00
TOTAL:			\$10.00

▶ Transaction detail for payment to City of The Dalles. Date: 06/08/2023 - 2:37:39 PM MT

Transaction Number: 199143378
 Mastercard — XXXX-XXXX-XXXX-0664
 Status: Successful

Account #	Item	Quantity	Item Amount
	Convenience Fee	1	\$2.50
TOTAL:			\$2.50

Billing Information
 Oregon Equipment Ron Nelson
 , 97058

Transaction taken by: Admin JCorbin

Print | Close

Email

Resend Receipt

Payment Service Provided By www.xpressbillpay.com

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