

CITY OF THE DALLES PUBLIC WORKS 1215 WEST 1<sup>st</sup> STREET THE DALLES, OREGON 97058 (541) 298-5401

Application Fee\$10Expedite Fee\$25Event Deployment Fee\$50A 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: 11.18.2024

Format: MM/DD/YYYY				
Applicant First Name	Applicant Last Name			
Joshua	Manning			
Primary First Name	Primary Last Name			
Contact/Responsible Party	Email:			
	jmanning174@gamil.com			
If the responsible party is not the applicant	Primary email address			
Business Name:	Mailing Address:			
N/A	204 W 14th St The Dalles, OR			
Phone:	Other Phone:			
520-678-2239	541-340-9445			
On-call emergency phone number	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:	For sidewalk closures, select a type of Temporary Pedestrian Accessible
Street (TCP Required)	Route Plan (TPARP):
Sidewalk (TPARP Required)	🗌 1.a. Sidewalk diversion - Within roadway
City-Owned Parking Lot (TCP Required)	1.b. Sidewalk diversion - Additional right-of-way
✓ Dumpster placed in the right-of-way	2. Sidewalk closure - Mid-block
✓ Other (Describe below)	3. Sidewalk closure - Corner

We are moving and need to have the dupmster and U-Pack Trailers staged in front of our home, where we normally park. The sidewalks and road way will not be impacted.

Please describe other type of right-of-way closure

Location(s) of closure 204 W 14th St. The Dalles, OR Reason for closure (e.g. event, construction, etc.)

Moving

Please write the addresses or section	ns of sidewalk/street for the requested closure.	Please describe the projec	t or event for the requested closure.
Closure begin date	Time	Closure end date	Time
11/22/2024	8am	11/29/2024	5pm
Format: MM/DD/YYYY		Format: MM/DD/YYYY	

#### 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 <u>Oregon Temporary Traffic Control Handbook</u>.

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.

11/18/24

**Applicant Signature** 

Please save the form after signing. Then click to email the form to publicworks@ci.the-dalles.or.us

#### **Receipt of Required Items**

City Use Only

TCP for Street/Parking Lot Closure:	Attached	Not Required	
TPARP for Sidewalk Closure:	Attached	🖌 Not Required	
Certificate of General Liability:	Attached	Not Required	Property Owner No COI needed
Payment Received: Check	Cash	Credit Card	1 7

- The dumpster must NOT obstruct traffic and allow enough room for the traffic to safely get by.
  The applicant must place cones at both exterior corners. Cones can be borrowed from Public Works.

# **Record of Approvals**

Michael H. Digitally signed by Michael H. Bosse Date: 2024.11.19 12:42:04 -08'00'

Americans with Disabilities Act Coordinator

Human Resources/Risk Director

David Mills Digitally signed by David Mills Date: 2024.11.19 13:53:10 -08'00'

11/30/24

Transportation Division Manager Permit Expiration Date

XBP Confirmation	Number: 215723995	313 Cour The	y of The Dalle t Street   PO Bo Dalles, OR 9709 541) 296-5481	x 1790	ter 📄	
Transaction det	ail for payment to City of The Dalle	s.	Date: 11/2	1/2024 - 2:41:48 PM N	IT	
	Transaction Number: 230846359 Visa — XXXX-XXXX-3422 Status: Successful					
Account #	Item		Quantity	Item Amount		
	SidewalkStreet Closure Permit		1	\$10.00	0	
			ΤΟΤΑ	L: \$10.0	00	
Billing Information Joshua Manning 97058	n		Transaction t	aken by: Admin JCorb	oin	
		Email	V jmanning1	74@gamil.com		
Print	Close				Receipt	
	Payment Service Provided	By www.xpress	sbillpay.com			
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