



1215 WEST 1st STREET
THE DALLES, OREGON 97058
(541) 288-5401

Application Fee \$0
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:

10-1-25

Format: MM/DD/YYYY

Applicant First Name

Chuck

Primary First Name

Applicant Last Name

Gomez

Primary Last Name

Contact/Responsible Party

Same

If the responsible party is not the applicant

Email:

INFO@WATSEKATheatre.com

Primary email address

Business Name:

Granada Theatre

Mailing Address:

P.O. Box #1329

Phone:

Same 815-993-2880

On-call emergency phone number

Other Phone:

Same

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

Please describe other type of right-of-way closure

Location(s) of closure

Corner 2nd & Wash. St.

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

Sign Repairs

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

10-2-25

Format: MM/DD/YYYY

Time

8:00-9:00 AM

Closure end date

10-2-25

Format: MM/DD/YYYY

Time

7 AM

CG.

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](#).

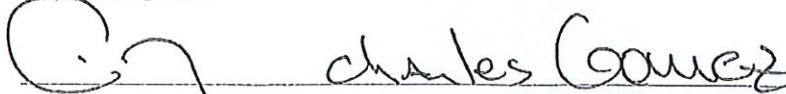
Acknowledgment of Applicant Responsibility

- ☒ 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



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:

TPARP for Sidewalk Closure:

Certificate of General Liability:

Payment Received: ☐ Check

☐ Attached
☒ Attached
☒ Attached
☐ Cash

☒ Not Required
☐ Not Required
☐ Not Required
☒ Credit Card

1. All signs and barricades required by the TPARP shall be in place prior to any work starting in the Right of Way.

Record of Approvals

Michael H. Bosse

Digitally signed by
Michael H. Bosse
Date: 2025.10.08
09:42:21 -07'00'

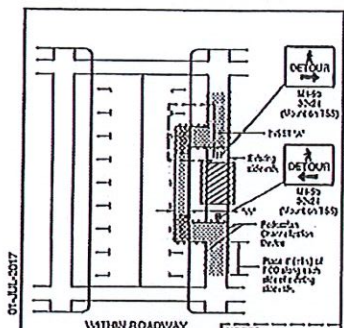
Americans with Disabilities Act
Coordinator



Transportation Division
Manager

10/17/2025

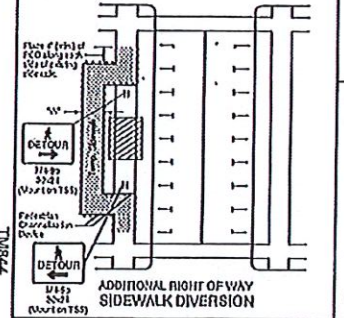
Permit Expiration Date



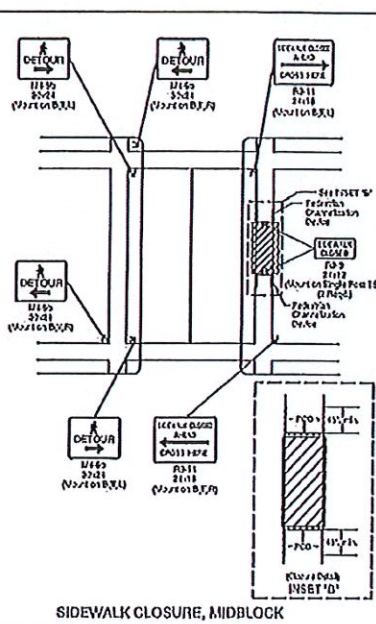
WITHIN ROADWAY SIDEWALK DIVERSION

NOTES:

- Place or construct temporary sidewalk ramp, as needed.
- For roadways with pre-construction posted speed of 40 mph or less.
- See sheet 'A' for Temp. Sidewalk Ramp details.
- 10' x 6' or, where a 10' x 6' sidewalk is not available, provide 10' x 6' with 6' x 6' passing spaces every 200 ft.
- Use temporary ADA compliant surfaces to ensure proper ADA access.



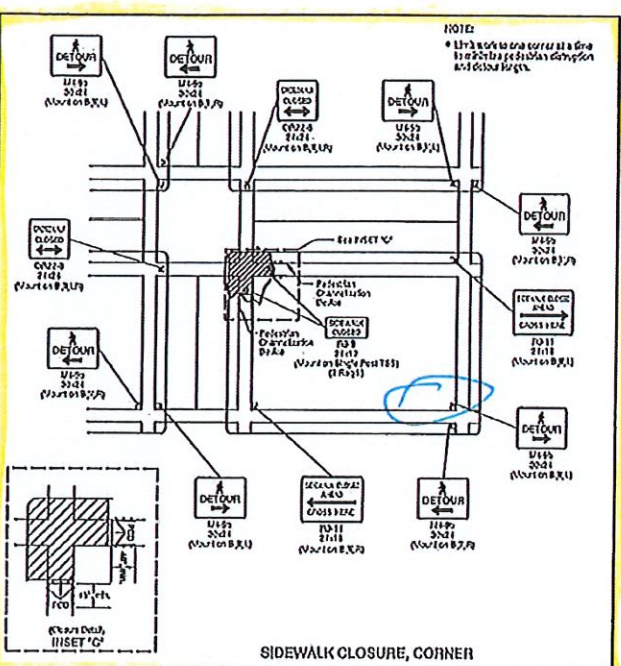
ADDITIONAL RIGHT-OF-WAY SIDEWALK DIVERSION



SIDEWALK CLOSURE, MIDBLOCK

GENERAL NOTES FOR ALL DETAILS:

- When closing or reducing pedestrian or bicycle travel, provide ADA compliant access. Include necessary features consistent with existing conditions by providing adequate slope, width and surface.
- Provide necessary, but not minimum, surface through and across the closure. Provide 4' x 6' with 6' x 6' passing spaces every 200 ft along the route.
- Only TCD for pedestrian use shown. Other closures may be necessary to control vehicle traffic.
- Signs must be necessary to provide a temporary pedestrian access to the sidewalk. For roadways with no sidewalk, provide a temporary sidewalk at the end of the block.
- Minimize pedestrian travel distance.



SIDEWALK CLOSURE, CORNER

LEGEND:

- WALKWAY
- UNDER CONSTRUCTION
- PEDESTRIAN CHANNELIZATION DEVICE

To be accompanied by Dep. Dir. T-1001

NOTE: The selection and use of this Standard Drawing, which is subject to change without notice, is the responsibility of the user and should not be used without consulting a Registered Professional Engineer.

CITY OF THE DALLAS STANDARD DRAWING

TEMPORARY PEDESTRIAN ACCESS ROUTING

2018

REVISION

TM844

Client#: 13173

YESCOCERTS

ACORDTM

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/30/2025

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Moreton & Company P.O. Box 58139 Salt Lake City, UT 84158-0139 801 531-1234		CONTACT NAME: PHONE (A/C, No, Ext): 801 531-1234 FAX (A/C, No): 801-531-6117 E-MAIL ADDRESS: yescocertificates@moreton.com	
INSURED YESCO LLC 2401 Foothill Drive Salt Lake City, UT 84109		INSURER(S) AFFORDING COVERAGE INSURER A: Zurich American Insurance Company NAIC # 16535 INSURER B: American Zurich Insurance Company 40142 INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES

CERTIFICATE NUMBER:

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 SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PROJECT ☐ LOC OTHER:		GLO630366200	10/01/2025	10/01/2026	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000 \$
A	AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$		BAP630366200	10/01/2025	10/01/2026	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ EACH OCCURRENCE \$ AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐ Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	WC630366100 Employers Liability Only for ND, OH, WA & WY	10/01/2025	10/01/2026	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

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

Project: Granada Theatre, 221 E 2nd Street, The Dalles OR 97058

City of The Dalles and Owner is included as Additional Insured as respects General Liability (CG2010 & CG2037) where required by written contract as respects work performed by the Named Insured.

BOI/LM/SBushey/SOY-134229 Comp Ops 10/2026

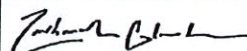
CERTIFICATE HOLDER

CANCELLATION

City of The Dalles
 Public Works Department
 313 Court Street
 The Dalles, OR 97058

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: 244672474

Transaction detail for payment to City of The Dalles.		Date: 10/01/2025 - 5:24:24 PM MT	
Transaction Number: 253162005 Visa — XXXX-XXXX-XXXX-5244 Status: Successful			
Account #	Item	Quantity	Item Amount
	SidewalkStreet Closure Permit	1	\$25.00

TOTAL: **\$25.00**

Billing Information
Charles Gomez
97058
info@watsekatheater.com

Transaction taken by: Admin ckeever