



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

Application Fee	\$50
Expedite Fee	\$50
Event Deployment Fee	\$100
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:

Format: MM/DD/YYYY

Applicant First Name

Applicant Last Name

Primary First Name

Primary Last Name

Contact/Responsible Party

Email:

If the responsible party is not the applicant

Primary email address

Business Name:

Mailing Address:

Phone:

Other Phone:

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:

- ☐ 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

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

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

Time

Closure end date

Time

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: \$50.00
- 2. Expedited Fee (when application is turned in less than 5 days prior to the event): \$50.00
- 3. Event Deployment Fee (on for profit events which require use of City signs and barricades that staff deliver to event):\$ 100.00
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@thedalles.gov

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
Payment Received:	Check	Cash	Credit Card

Record of Approvals

Americans with Disabilities Act
Coordinator

Transportation Division
Manager

Permit Expiration Date

See Traffic Control Plans MAP

Need sidewalk closure around the building at 200 E 2nd Street

* Keep pedestrian off Sidewalk next to building and Provide space for workers to work on the building.

**All work is going to be ariel from the lift on metal cornices and roof area. Workers doing the metal will keep the sidewalk open when they are not doing work that could impact the area below.

Southwest corner of 2nd & Court Street – Sidewalk closed ahead

Southeast corner of 2nd & Court Street – Sidewalk closed Detour to Northside of street

Sidewalk Closed Sign at 202 E 2nd facing East

Southeast corner of 2nd & Washington Street – Sidewalk closed ahead

Southeast corner of 2nd & Washington Street –Detour to Northside of street

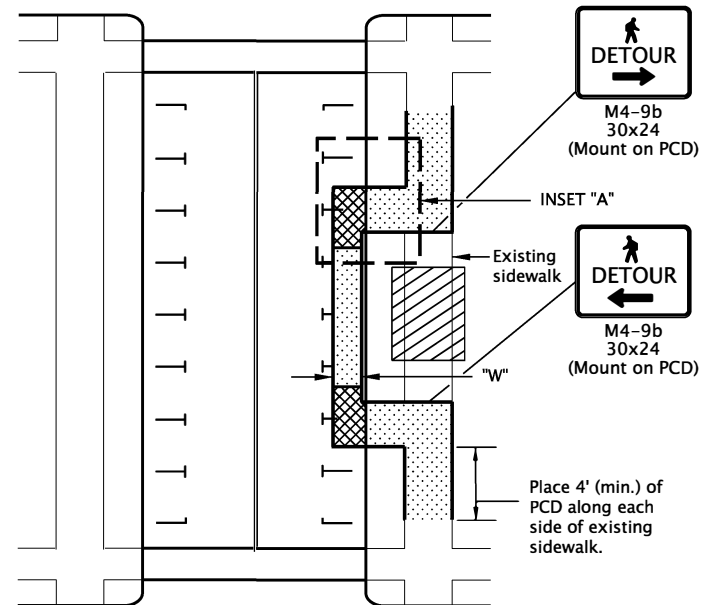
Sidewalk Closed Sign at 306 Court Street facing North; 306 Court St will be Open & unblocked

May not be needed

Northeast corner of 3rd & Court Street – Sidewalk closed ahead

Northeast corner of 3rd & Court Street – Detour to West side of street

We'll notify Discount Plus Store at 212 E 2nd Street that we are requesting the closure of the sidewalk at the far west side of their building.



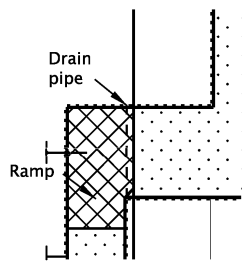
Within Roadway SIDEWALK DIVERSION

NOTES:

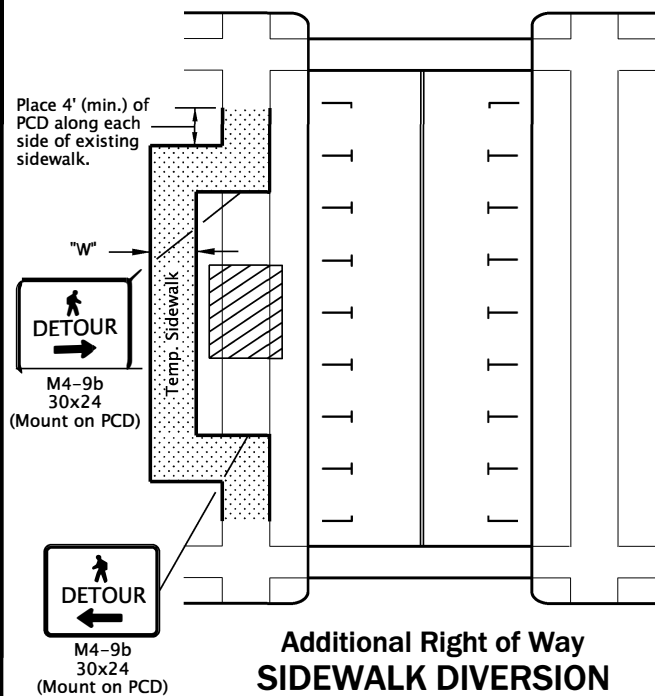
- Place or construct temp. sidewalk ramp, as needed.
- For roadways with a pre-construction posted speed of 40 mph or less.
- See inset "A" for Temp. Sidewalk Ramp details.
- "W" = 60", or, where 60" width cannot be maintained through the entire route, provide 48" min. width with 60" x 60" passing spaces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

NOTES:

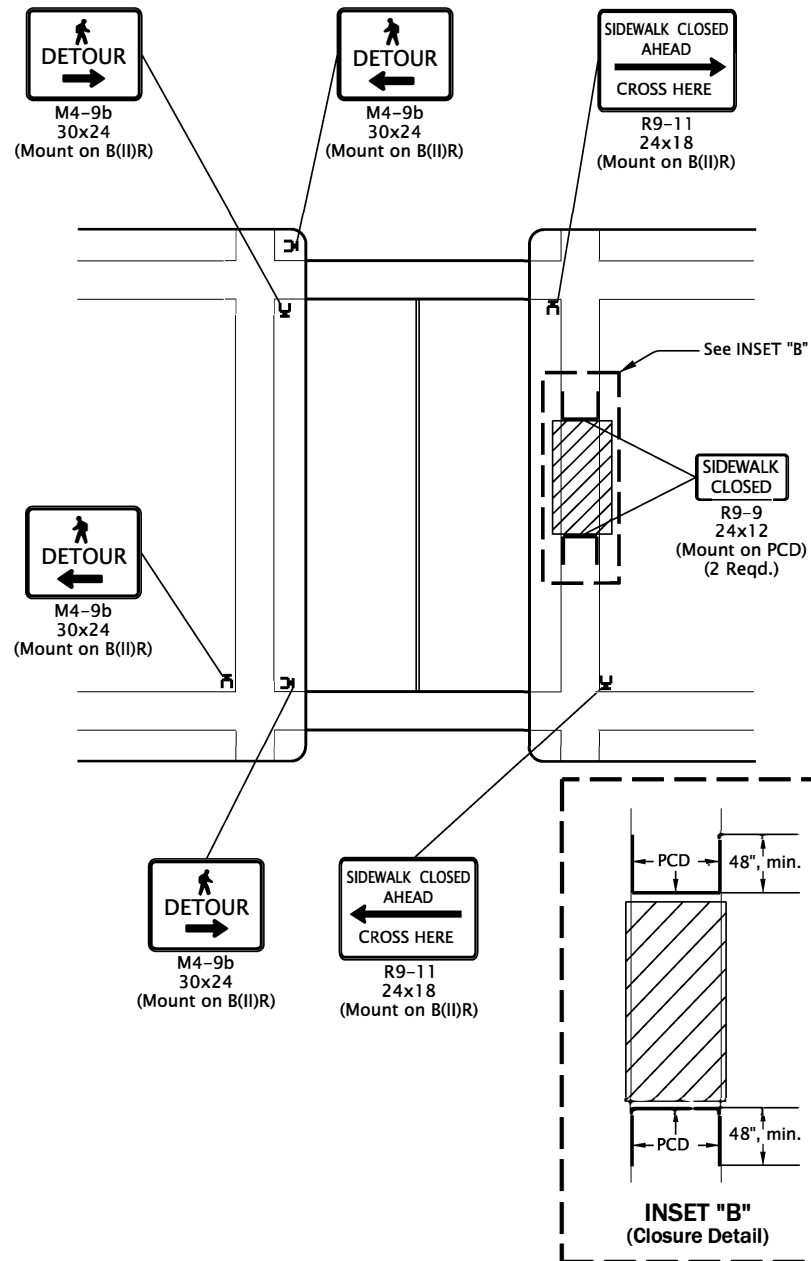
- Ramp size will vary. Ramp must meet ADA requirements incl. max. finished surf. slope of 8.3% and max. finished cross slope of 2.0%.



INSET "A"
(Temp. Sidewalk Ramp)



Additional Right of Way SIDEWALK DIVERSION

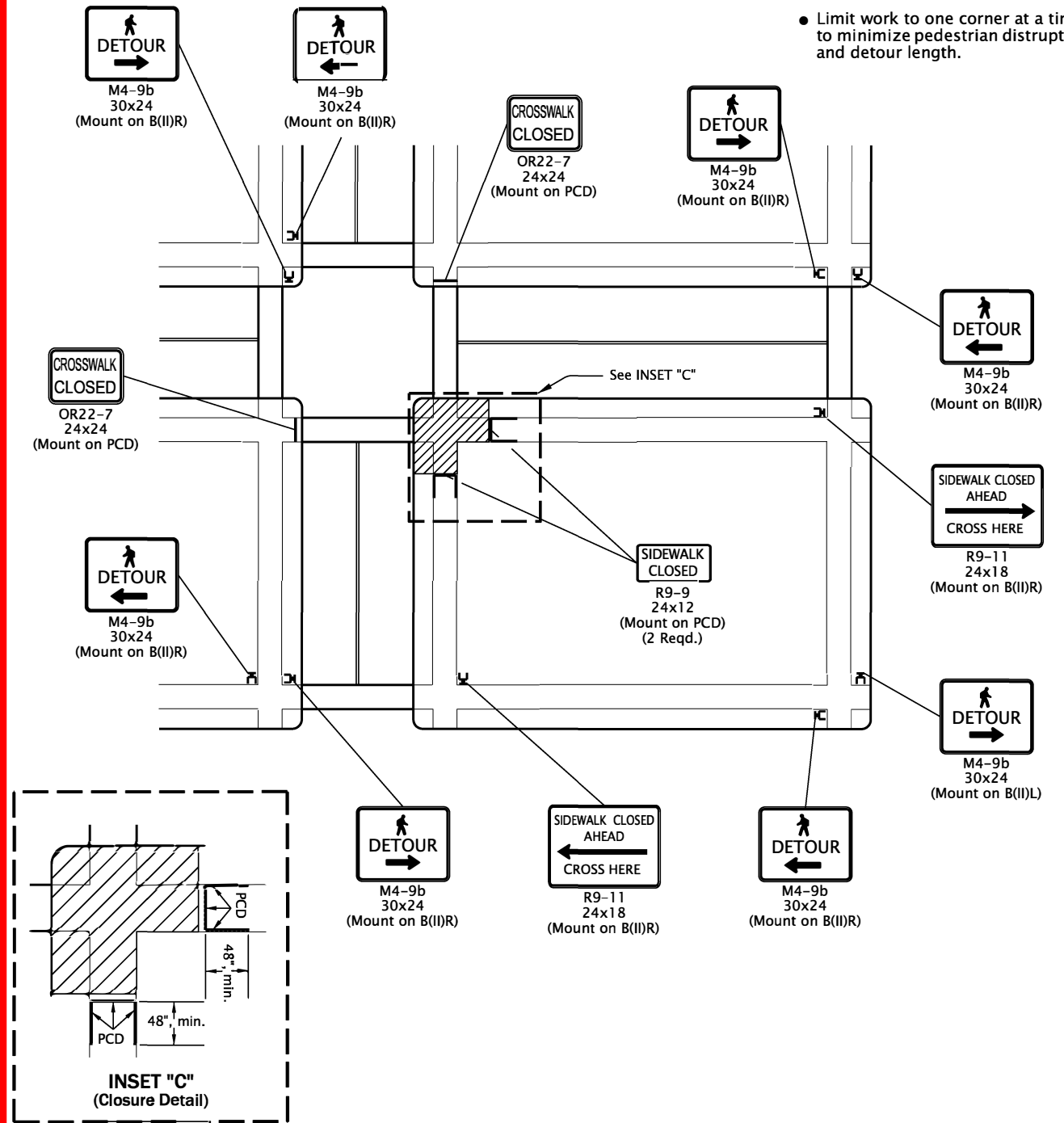


SIDEWALK CLOSURE, MIDBLOCK

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.
- To be accompanied by Dwg. Nos. TM820 & TM821.

- 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.

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 first consulting a Registered Professional Engineer.

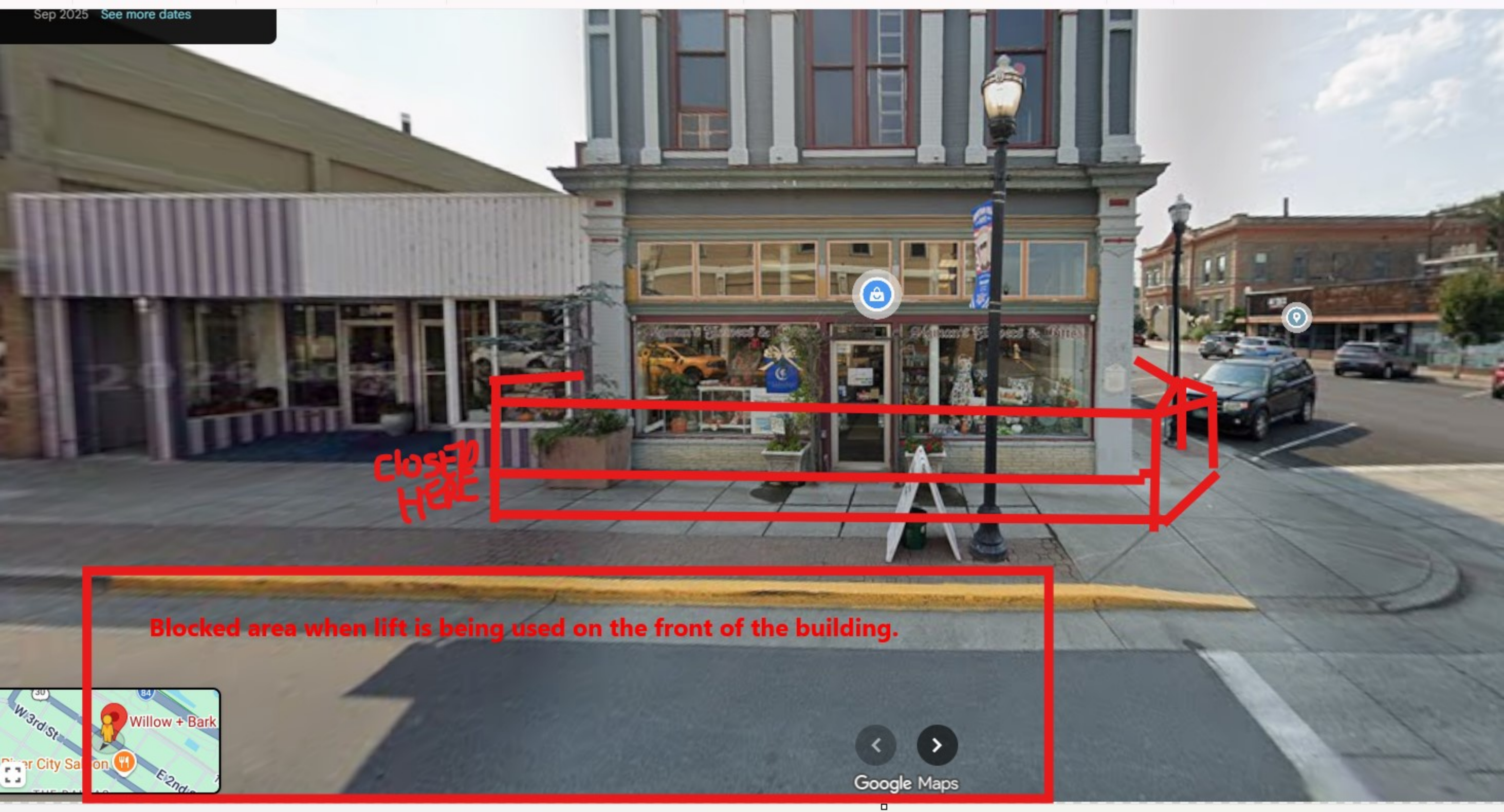
NOTE: All material and workmanship shall be in accordance with the current City of The Dalles Standard Specifications

CITY OF THE DALLES STANDARD DRAWINGS TEMPORARY PEDESTRIAN ACCESSIBLE ROUTES

2025

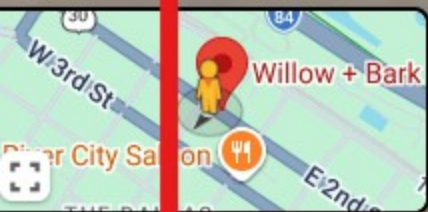
DATE	REVISION	DESCRIPTION
01-2022	REVISION DESCRIPTION	
07-2023	Revised notes for temporary sidewalk ramp.	
	OR22-8 signs were replaced with OR22-7 signs.	

CALC. BOOK NO.	N/A	SDR DATE	14-JUL-2023	TM844
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CLOSED
HERE

Blocked area when lift is being used on the front of the building.

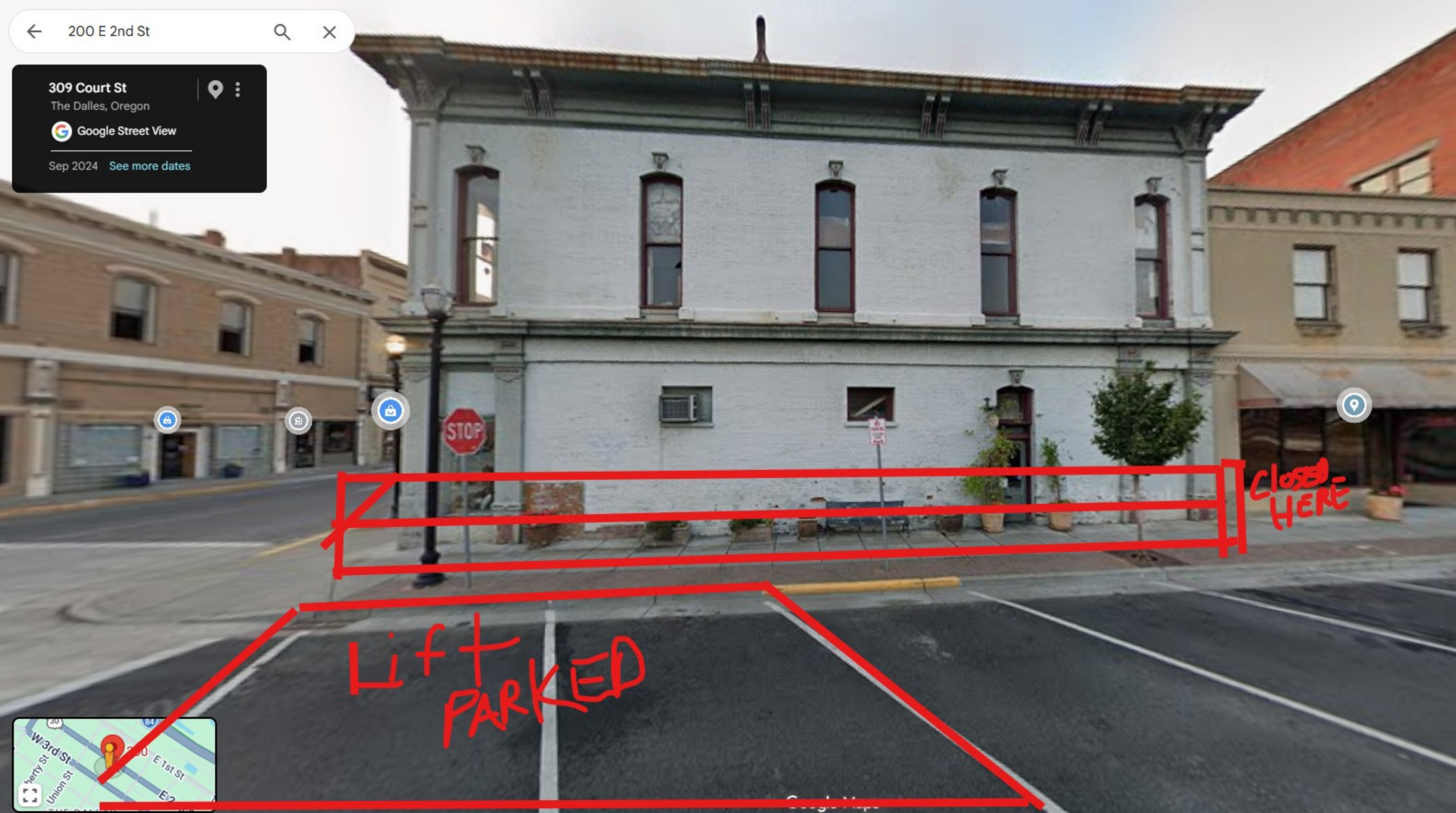


309 Court St

The Dalles, Oregon

 Google Street View

Sep 2024 [See more dates](#)



LIFT
PARKED





City of The Dalles
313 Court Street | PO Box 1790
The Dalles, OR 97058
(541) 296-5481

XBP Confirmation Number: **315162347**

Transaction detail for payment to City of The Dalles.		Date: 05/14/2026 - 12:15:16 PM MT	
Transaction Number: 270213620 Visa — XXXX-XXXX-XXXX-5928 Status: Successful			
Account #	Item	Quantity	Item Amount
	SidewalkStreet Closure Permit	1	\$50.00

TOTAL: **\$50.00**

Billing Information
Micheal Leash
97058

Transaction taken by: Admin JCorbin



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/16/2026

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 IMA, Inc. - Oregon 1111 Gateway Loop Springfield OR 97477		CONTACT NAME: IMA Certificate Team PHONE (A/C, No, Ext): E-MAIL ADDRESS: certificates@imacorp.com		FAX (A/C, No):
		INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A : Continental Casualty Company		20443
		INSURER B : Valley Forge Insurance Company		20508
		INSURER C : The Continental Insurance Company		35289
		INSURER D : SAIF Corporation		36196
		INSURER E : Lloyd's Syndicate 3624 (Hiscox Syndicates Limited)		
		INSURER F :		

COVERAGES**CERTIFICATE NUMBER:** 1257071775**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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR ☒ Deductible \$2,000 GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PRO-JECT ☐ LOC OTHER:			6079424056	10/1/2025	10/1/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY			6079424042	10/1/2025	10/1/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	☐ UMBRELLA LIAB ☒ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE DED ☒ RETENTION \$ 10,000			6079424073	10/1/2025	10/1/2026	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N ☒ Y ☐ N	N/A	487382	10/1/2025	10/1/2026	☒ 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
A E	Installation Floater Professional Liability			6079424056 ANE560558626	10/1/2025 1/29/2026	10/1/2026 10/1/2026	See Below See Below

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

Workers Compensation Information: Proprietors/Partners/Executive Officers/Members Excluded: subject to the policy terms and conditions.

Installation Floater: Property at Job Site Limit \$100,000; Property Temporary Storage Limit \$100,000; Property in Transit Limit \$100,000; Deductible \$1,000.

Professional Liability Coverage: Each Claim \$2,000,000; Aggregate \$2,000,000; Retention \$5,000; Retroactive Date 1/29/2026.

Certificate Holder and all other parties required by the contract are included as Additional Insured including Ongoing and Completed Operations on the General See Attached...

CERTIFICATE HOLDER**CANCELLATION**City of the Dalles
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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**ADDITIONAL REMARKS SCHEDULE**Page 1 of 1

AGENCY IMA, Inc. - Oregon		NAMED INSURED TT&L Sheet Metal Inc 6585 SW Fallbrook Pl. Beaverton OR 97008	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 **FORM TITLE:** CERTIFICATE OF LIABILITY INSURANCE

Liability Policy and Additional Insured on the Automobile Liability and Excess Liability Policies, if required by written contract or agreement, subject to the policy terms and conditions.
This Insurance is Primary & Non-Contributory on the General Liability, Automobile Liability and Excess Liability Policies, if required by written contract or agreement, subject to the policy terms and conditions.
A Waiver of Subrogation is provided in favor of Certificate Holder and all other parties required by the contract on the General Liability, Automobile Liability, Excess Liability and Workers Compensation Policies, if required by written contract or agreement, subject to the policy terms and conditions.
Excess Liability policy is in excess of the General Liability, Automobile Liability and Employers Liability Policies, subject to the terms and conditions of the policy.
RE: Sigman's Flower Shop.