

## APPLICATION FOR STREET CLOSURE PERMIT (SPECIAL EVENT)

| Organization                              |  |  |
|---|--|--|
| Address                                   |  |  |
| Two Responsible Representativ             | res who may be reached in case of emergency  |  |
| Name                                      | Name   |  |
| Address                                   | Address  |  |
| Phone (Cell)                              |  |  |
| Phone (Other)                             |  |  |
| Email                                     | F 0  |  |
| Location  Name of Street(s) to be closed: |  |  |
| Portion (i.e. north side, parking la      | ane, etc.)   |  |
| Limits (i.e. between which cross          | streets)   |  |
| Date:                                     | Time:  |  |
|   |  |  |
| Provisions for Emergency Access           | :  |  |
| YES NO NO If yes, section 9.23.020 of C   | imed on the street in connection with the special event?  hapter 9.23 of the Claremont Municipal Code shall not apply to this ion of alcoholic beverages is concerned. |  |

## **Additional Requirements**

- A traffic control plan is required. Please attach professionally drawn maps.
- A Petition Form (see attached) signed by impacted residents and businesses will be required.
- Certificate of Insurance is required that names the City of Claremont, its officers, agents, and employees as additional insured for protection against claims of third parties for personal injuries, wrongful death, and property damage.
- All methods of closure (i.e. signs, barricades, etc.) shall comply with California Manual on Uniform Traffic Control Devices (CA MUTCD) and local regulations.
- All "No Parking" signs must be placed at least 72 hours in advance with appropriate contact number.
- The following organizations will be notified by the City of Claremont. Any changes will require that the applicant notify them.

| Claremont Police Department         | (909)399-5411  | L.A. County Fire Dept. Station #102 | (909) 621-4381 |
|-------------------------------------|----------------|-------------------------------------|----------------|
| Claremont Community Services        | (909) 399-5431 | Falck Ambulance                     | (714) 288-3800 |
| L.A. County Fire Dept. Station #62  | (909) 626-5096 | United States Post Office           | (909) 392-4681 |
| L.A. County Fire Dept. Station #101 | (909) 626-7351 | Claremont Courier                   | (909) 621-4761 |



## **INDEMNITY AGREEMENT**

In consideration of the City of Claremont granting permission to close the street noted above, the undersigned agrees to indemnify the City, its officers, agents, and employees, and hold them harmless against any and all claims, demands, or liabilities, including all attorneys' fees, costs, and expenses incurred in defending any claims, whether, but not by way of limitation, such claims, demands, or liabilities arise out of personal injury or death or any injury to property and whether such injury or death is caused by any negligence, errors, or omissions of the undersigned or their agents. The obligation to indemnify the City shall not extend to any claims, demands, or liabilities arising from the sole negligence or willful misconduct of the City or of the City's officers, agents, or employees acting in the scope of such office, agency, or employment.

I agree I have read these documents and will follow all Conditions of Approval and approved traffic control plans.

| Signature of | Applicant Applicant                               |                   |
|--------------|---|-------------------|
| Executed th  | is,,  | in Claremont, CA. |
| Non-refunda  | able permit fee of \$                             |                   |
| Approved: _  | City Engineer / Director of Community Development | Date              |