



## APPLICATION FOR ROAD USE FOR SPECIAL EVENTS

Name of Event \_\_\_\_\_ Organization \_\_\_\_\_

Applicant's Name \_\_\_\_\_ Position \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

### TYPE OF SPECIAL EVENT

- Parade     Bicycle Race     Walk-A-Thon     Procession     Street Festivities  
 Running Event     Sidewalk Sale     Filming     Other(specify) \_\_\_\_\_

Route \_\_\_\_\_

County Road Numbers \_\_\_\_\_

Date of Event \_\_\_\_\_ Start Time \_\_\_\_\_ am/pm    Finish \_\_\_\_\_ am/pm

Number of Participants \_\_\_\_\_

Municipality Contract \_\_\_\_\_ Municipal Approval \_\_\_\_\_  
(signature)

Police Representative \_\_\_\_\_ Detachment \_\_\_\_\_

Phone Number \_\_\_\_\_

This event requires a Road Closure     Yes     No

Certificate of Public Liability Insurance Attached    Yes  
(with loss payable to Northjmbreland County as an additional insured.)

Traffic Control / Signage provided by \_\_\_\_\_

Detour provided by \_\_\_\_\_

### I/WE HEREBY AGREE TO THE FOLLOWING CONDITIONS:

1. To indemnify and save harmless the Corporation of the Municipality of Trent Hills from any and all claims and/or damages arising out of this road closing and to provide any bond or insurance which may be required in this regard.
2. To be responsible for any and all costs to provide and maintain sufficient traffic control measures to ensure safety for the travelling public and participants.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
This section to be completed by the Municipality of Trent Hills:

Road Closing By-Law Required     Yes     No

Date Submitted to Public Works Department \_\_\_\_\_

Approval by Public Works Department \_\_\_\_\_

This form is to be delivered to the MUNICIPALITY OF TRENT HILLS, Clerk's Department,  
66 Front Street South, Campbellford, ON K0L 1L0 – Fax (705) 653-5203