



Municipality of Dysart et al
 135 Maple Ave, PO Box 389
 Haliburton, ON K0M 1S0
 Phone: 705-457-1740 Fax: 705-457-1964

SPECIAL EVENTS PERMIT FOR ROADS AND SIDEWALKS

Introduction

The following pages contain the Municipality of Dysart et al's *Special Events Permit for Roads and Sidewalks* and *Request for Road Closure*. Please refer to the attached By-law _____.

Please return the completed application within **15 business days (or more) prior to your event** to the Recreation Program Coordinator located at 135 Maple Ave, PO Box 389, Haliburton, ON K0M 1S0. Allow for **10 business days** from date of receipt of application for Municipal review/comments.

Applicant Information

Group/Event Name (to be defined as Special Events Operator):

Nature of Event: _____

Contact # 1: Name: _____ Telephone #: _____
 Cell #: _____
 Address: _____ Email: _____

Contact # 2: Name: _____ Telephone #: _____
 Cell #: _____
 Address: _____ Email: _____

Has Group/Event held a parade/event in previous two (2) years?: Yes No

If so, what was the name of Group/Event: Same as above Other: _____

The Special Events Operator Must

It is the responsibility of the Special Events Operator to complete and/or submit the following no later than 15 business days prior to the event:

- Provide *proof of liability insurance* to insure against loss or damage resulting from bodily injury, death or damage to property, with a *minimum coverage of two million dollars (\$2,000,000)*, with the Municipality of Dysart et al added as an additional insured party
- Provide copy of Health Unit approvals (if required)
- A map of the town of Haliburton and Road Closure Request Form are attached. Please provide the Municipality a completed copy that indicates the streets required for the event and/or Parade Route and a map detailing the direction of the route to be travelled, noting locations of barricades/cones, and traffic control persons - **MUST be included with this form**
- Notify the following authorities: Paramedic 705-457-1616, Police 1-888-310-1122 and Fire Department 705-457-2126
- Provide necessary traffic control persons with appropriate personal protective equipment/clothing and costs for such. It is the sole responsibility of the Special Events Operator to ensure safety for the travelling public and participants, and training of traffic control persons.
- Request in advance from the Municipality to borrow the following items (if available):
 - Barricades # _____
 - Traffic Cones # _____
 - Other: _____

*Must e-mail rcamelon@dysartetal.ca **no later than 5 business days prior to event** with date, time and locations required for the above items, along with the name of the contact person who will be available to assist when items are delivered.

- Other equipment/supplies provided by the Special Events Operator and the locations (please list and indicate on the map).
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Event Details

- Date of Parade/Event: _____ Start Time: _____ am/pm
- Set-up Start Time: _____ am/pm Location: _____
- End /Clean-up Time: _____ am/pm Location: _____
- Street closures times: Closure: _____ am/pm Re-open: _____ am/pm

Event Set-up, Clean-up and General Maintenance

As a Special Events Operator, you are responsible for all set-up and clean-up of the event site by the end time of the event specified above. The Municipality of Dysart et al will provide all normal maintenance services to its current routine standards. Any additional maintenance required by the special events operator/user prior to or during the event shall be at the sole cost and responsibility of the Special Events Operator.

I/We hereby agree to the above conditions and declare that the foregoing information is true and complete to my/our knowledge. I/We indemnify and save harmless the Corporation of the Municipality of Dysart et al from any and all claims and/or damages arising out of this Event/Road Closure and to provide any bond or insurance which may be required to this regard.

 Signature of Special Events Operator/Chairperson

Date

OFFICE USE ONLY – PUBLIC WORKS

- Approved Approved with Changes/Comments Denied

 Signature of Director of Public Works (or Designate)

Date

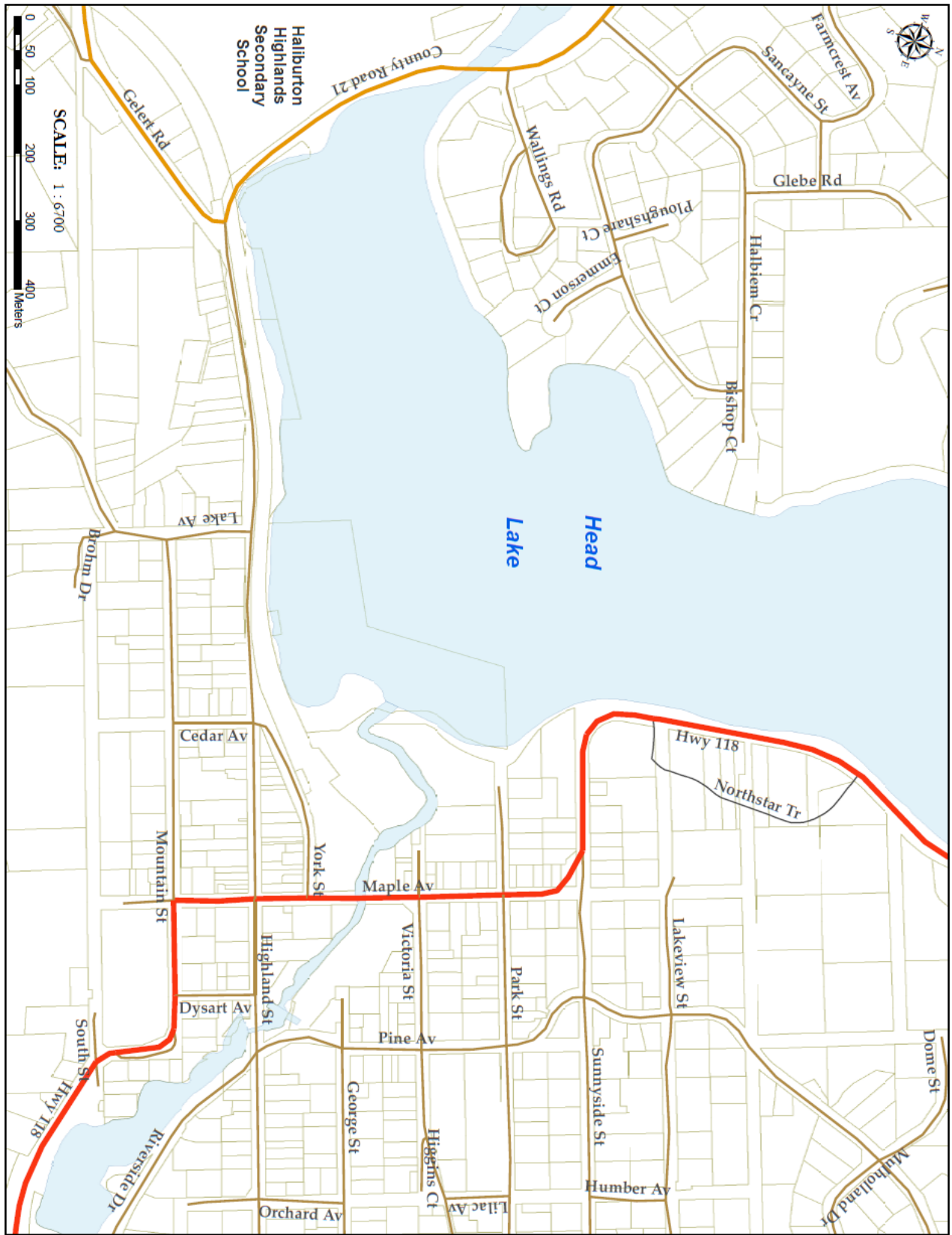
OFFICE USE ONLY – PARKS & RECREATION

- Reserved on Event Calendar Special Events Operator notified

Departments Notified: Parks & Recreation Roads
 Bylaw Landfill

 Signature of Recreation Program Coordinator

Date



ROAD CLOSURE REQUEST FORM

For partial and/or complete road closures provide all roadway names and specific locations, including intersections and/or civic address numbers.

Street Name: _____

From (Address): _____ To (Address): _____

Street Name: _____

From (Address): _____ To (Address): _____

Street Name: _____

From (Address): _____ To (Address): _____

Street Name: _____

From (Address): _____ To (Address): _____

Street Name: _____

From (Address): _____ To (Address): _____

Street Name: _____

From (Address): _____ To (Address): _____

Street Name: _____

From (Address): _____ To (Address): _____

Street Name: _____

From (Address): _____ To (Address): _____

SPECIAL EVENTS OPERATOR CHECKLIST

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