

APPLICATION FOR ROAD USE FOR SPECIAL EVENTS

NAME OF EVENT: _____

SPONSORING ORGANIZATION: _____

APPLICANT'S NAME: _____

MAILING ADDRESS: _____

TELE #: (H) _____ (W) _____ FAX #: _____

TYPE OF SPECIAL EVENT

Parade _____ Bicycle Race _____ Walk-A-Thon _____ Filming _____
Procession _____ Street Festivities _____ Running Event _____
Sidewalk Sale _____ Other _____ Please Specify: _____

Affected Roads: _____

Date of the Event: _____ Scheduled Start _____ Finish _____

Number of Participants _____

Hamilton Township Contact Representative _____

Ontario Provincial Police Contact _____

I/WE HEREBY AGREE TO THE FOLLOWING CONDITIONS:

1. To save the Township of Hamilton and the area municipality harmless from any and all claims and/or damages arising out of this road closing and/or this special event 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 TOWNSHIP STAFF

1.	Road Closing by law required	Yes _____	No _____
	Date Submitted to Public Works	_____	
	Expected Date of Council Approval	_____	
2.	Certificate of public liability insurance required	Yes _____	No _____ Amount \$ _____
3.	Traffic control signing to be provided by:		
	Municipality	_____	
	Detour to be provided by Public Works	_____	Deposit Amount \$ _____
4.	Recommendation of D.P.W.	Approve _____	Deny _____
5.	Council	Approve _____	Deny _____
6.	Date Applicant Notified:	_____	