



CITY OF BELVEDERE

450 San Rafael Avenue
Belvedere CA 94920

ROAD CLOSURE PERMIT

Please print legibly:

LOCATION OF STREET CLOSURE _____
DATE AND TIME OF CLOSURE _____
PURPOSE OF STREET CLOSURE _____

PERSON OR COMPANY CLOSING STREET:

Name: _____

Address: _____

Emergency Phone: _____ Fax Number: _____

ROAD CLOSURE SIGNS SHALL BE POSTED BY PERMITTEE BEFORE _____
AT THE FOLLOWING LOCATIONS _____

Contractor can ensure that roadway may be reopened and made passable to Fire Department and Police emergency vehicles within 2 to 3 minutes. **Yes** **No**

THE PERSON WHOSE SIGNATURE APPEARS ABOVE IS HEREBY GRANTED PERMISSION TO CLOSE THE STREET AS REQUESTED HEREIN ABOVE SUBJECT TO THE FOLLOWING CONDITIONS AND LIMITATIONS: _____

Indemnification: Permittee shall indemnify, release, defend and hold harmless the City, its officers, agents, employees and volunteers against any and all claims, demands, suits, losses, liabilities or expenses of any kind, including attorney's fees and administrative costs to the extent caused, arising out of or resulting in any way, or in part, from the negligent acts or omissions or willful misconduct of Permittee, its officers, agents, employees, or contractors, in connection with the Permittee's duties or obligations under this Permit, or the Permittee's use of the City's right-of-way, excluding any such liability caused by the sole active negligence or willful misconduct by the City. This indemnification shall survive any termination of this Permit. Permittee shall defend, indemnify, release and hold harmless the City, its officers, agents, employees, and volunteers, from any loss, liability or damage arising from any claim, action or proceeding seeking to attack, set aside, void or annul the City's approval of the Permittee's use of the City's right-of-way pursuant to this permit.

Signature of Person Requesting Permission to Close Street: x _____

Please Print Your Name _____

Date Approved _____ by _____

ROAD CLOSURE \$ _____

SIGNS \$ _____

TOTAL FEE \$ _____

RECEIPT NUMBER _____

Please note that a \$ _____ deposit check will be FORFEITED if signs are not taken down and presented at City Hall by _____