CITY OF CLAREMONT
APPLICATION FOR STREET CLOSURE PERMIT

Applicant

Address

Two Responsible Representatives who may be reached in case of an emergency

1. Name
   Address
   Phone (Home)
   Phone (Work)

2. Name
   Address
   Phone (Home)
   Phone (Work)

Name of Street to be closed:

Portion (i.e., north side, entrance side, parking lane, etc.):

Limits (i.e. between which cross streets):

(Continue on reverse if necessary)

Date(s)          Time(s)

Reason for Closure

If traffic is detoured, a traffic delineation plan will be required (Attach maps/drawing as needed)

Provisions for Emergency Access

Will alcoholic beverages be consumed on the street in connection with the event requiring street closure?

☐ Yes  ☐ No

If yes, section 9.23.020 of Chapter 9.23 of the Claremont Municipal Code shall not apply to this event as far as the consumption of alcoholic beverages is concerned

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 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 his (their) agents or 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.

All methods of closure (i.e. signs, barricades, etc.) shall comply with state and local regulations.

Executed this _____ day of _________ , ________, at Claremont, CA.

Signature of Applicant

CONDITIONS OF APPROVAL

Nonrefundable permit fee of $ 100.00 . 110-306-0000-4230

Approved: ____________________________

City Engineer / Director of Community Development  Date
The following will be notified by the City of Claremont. Any changes will require that you notify the following associations.

City of Claremont Police Department  
Attn: Watch Commander  
Local: (909) 399-5411  
Fax: (909) 399-5316

Los Angeles County Fire Department Station # 101  
Attn: Captain  
606 W. Bonita Ave. Claremont  
Fax: (909) 626-0835

Care Ambulance Service  
1517 West Braden Court  
Orange, CA 92868  
Local: (714) 288-3800  
Fax: (714) 288-3889  
billw@careambulance.net

Community Services Department  
Attn: Facilities Manager  
Attn: Street Division  
Local: (909) 399-5431  
Fax: (909) 626-9985

City of Claremont City Hall  
Attn: Engineering (909) 399-5465  
Attn: Planning (909) 399-5470

Additional Information:

United States Post Office  
140 Harvard Ave. Claremont  
Local: (909) 392-4681  
Fax: (909) 392-8821

The Claremont Courier  
114 Olive Street  
Claremont, CA 91711  
Local: (909) 621-4761  
Fax: (909) 621-4072

Los Angeles County Fire Department Station # 102  
Attn: Captain  
2040 Sumner Ave. Claremont  
Local: (909) 621-4381

Los Angeles County Fire Department Station # 62  
Attn: Captain  
3701 N. Mills Ave. Claremont  
Local: (909) 626-5096  
Fax: (909) 624-4931
The applicant requesting a Street Closure Permit is responsible for notifying all residents/businesses affected by the street closure. For the permit to be considered, this petition form must be completed and returned along with the application to the Engineering Division. Special circumstances may apply. The City Engineer gives final approval of all permits.

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