



Notification of Upcoming Street Closure for a Special Event

Date: _____

List name of the business or organization hosting the event: _____

List the name of the beneficiary (non-profit organization) of the event: _____

Approximate number of participants and spectators: _____

Name and phone number of the contact person for the event: _____

Name of the event: _____

The above listed have received a street closure permit for a moving event.

	Between	And
Time of Street Closure	Start:	End:
Participant type and number of entries of each type (check all that apply):		
<input type="checkbox"/> Participants/Spectators _____ <input type="checkbox"/> Animals _____ <input type="checkbox"/> Vehicles _____ <input type="checkbox"/> Floats _____		
<input type="checkbox"/> Bands _____ <input type="checkbox"/> Bikes _____		

The approved route is shown on the attached map.

If you have questions about the City's administration of this permit, please contact Allison Madsen, Special Events Program at 503-865-2482.

For event-specific questions please contact the event contact person listed above. For questions/concerns on the day of the event, please contact: _____, the on-site contact for this event.

SAMPLE NOTIFICATION/INTERSECTION FLYER

ATTENTION NEIGHBORS!

EVENT
NAME

ON STREET NAME

DAY OF THE WEEK AND DATE

BETWEEN TIME AND TIME

STREET NAME WILL BE OPEN
TO ALL TRAFFIC.

STREET NAME WILL BE
CLOSED TO TRAFFIC!

PLEASE CALL ORGANIZER PHONE FOR DETAILS



Additional Insured Endorsement

(If the PBOT determines a liability agreement will be required,
per fee schedule and Street and Sidewalk Use Administrative Regulations, section 10.B)

"Without prejudice to coverage otherwise existing herein, the City of Portland and all other governmental bodies having jurisdiction in the area, their officers and employees are included as additional insureds under this policy as to any claim or claims for injury to person, including death, or damage to property, resulting from or in any way associated with the use of or presence at the street, area or facility to which the permit for

(name of event)

pertains, by the sponsor/applicant, its agents, employees, volunteers, event participants or spectators. This policy covers all claims by the sponsor/applicant, its agents, employees, volunteers, event participants or spectators against the City of Portland, members of the City Council, and the officers, agents and employees of the City.

"It is understood and agreed that this policy shall not terminate or be cancelled prior to completion of the event without first giving 30 days' written notice of intention to terminate or to cancel said policy to the Bureau of Transportation.

"Notwithstanding the naming of additional insureds, the said policy shall protect each insured in the same manner as though a separate policy had been issued to each; but nothing herein shall operate to increase the insurer's liability as set forth elsewhere in the policy beyond the amount or amounts for which the insurer would have been liable if only one person or interest had been named as insured. The coverage must apply as to claims between insureds on the policy."

Permittee's Name (Printed)			
Signature of Permittee		Date	

Authorized Insurance Company Representative (Printed Name and Title)			
Signature of Authorized Company Representative		Date	

Please submit this form to: Allison Madsen, Special Events Program, City of Portland Bureau of Transportation, 503-865-2482, Allison.Madsen@portlandoregon.gov.