City of Mt. Angel

Approved by the City Council on:

_____

Permit #:_____

Street Closure Permit

Applicant Information

Name: _____ **Contact:** _____

Address: _____ **Phone:**_____

_____

Phone: _____

Event Details

Street(s) to be closed: _____ **Date of Event:** _____

Nature of Use:_____ **Setup Date/Time:** _____

_____ **Cleanup Date/Time**:_____

Please Submit:

- ☐ Site plan showing proposed street closure with traffic control plan. Type/# of barricades:_____/_____
- ☐ Notification form with signatures from businesses/property owners abutting street closure
- ☐ Certificate of Liability Insurance for $1,000,000
- ☐ For events where Alcohol is served:
  - o OLCC Permit or City Alcohol Permit
  - o Approval from Mt. Angel City Council

_____

I have read and agree to abide by the rules and regulations attached to this application.

Signed:_____ **Date:**_____

Permit Fee: ($25/day)_____ **Paid On:** _____ **Receipt #:**_____

☐ **Proof of Certificate of Coverage. Received:** _____

☐ **Abutting Property Notification Received:** _____ ☐ **OLCC Permit #:**_____

Approval by Police Chief _____ ☐ **Copy to Public Works**

Form updated 5/2013

The City of Mt. Angel is an Equal Opportunity Employer and Provider

CITY OF MT. ANGEL
RESOLUTION NO. 1244

A RESOLUTION OF THE CITY COUNCIL ADOPTING RULES FOR RENTAL OF CITY-OWNED FACILITIES, CONSISTENT WITH ORDINANCE 714.

WHEREAS, the City Council adopted Ordinance 714 regulating the rental of City-owned facilities and providing penalties in accordance with the Mt. Angel Code of Ordinances, Chapter 33, and;

WHEREAS, the rules for renting City-owned facilities are designed to protect the City of Mt. Angel, public property, and citizens, and;

WHEREAS, the fees set in the proposed rules are designed to offset costs of staff time, overhead, and materials associated with reviewing rental applications.

NOW THEREFORE, BE IT RESOLVED by the City Council of the City of Mt. Angel;

SECTION 1. Hereby Adopts the City Owned Facility Use Permit Rules, attached as Exhibit A.

SECTION 2. Any procedures that conflict with any rules or laws of the State of Oregon or the City of Mt. Angel are hereby declared to be void and shall not invalidate any remaining clauses.

SECTION 3. This resolution shall become effective immediately upon its passage by City Council.

Passed by the City Council this 4th day of August, 2008, by the following votes:

AYES: 5 **NAYS: 0**

APPROVED BY THE MAYOR this 6th day of August, 2008.

Thomas C. Bauman
Thomas C. Bauman, Mayor

ATTESTED BY:

James S. Hunt, City Administrator/Recorder

Filed in the City Recorder's office this 6th day of ~~May~~ August, 2008.

x) A $100.00 cleaning deposit will be collected at the time of application. The deposit is fully refundable only if the room is left in a clean manner with no damage.

xi) No deposits or fees will be collected for public agencies, i.e. fire district, school district, county, etc.

b) **STREET CLOSURE REQUEST**:

i) A street may be closed for an event that is non-political or non-commercial and provides a civic benefit to the community. The street closure is for restriction of vehicular access only, pedestrian access must be maintained at all times and the event must be free of admission charge to the general public at all times. Applications shall meet all requirements prior to permit issuance. There is no fee for community event permits.

ii) If alcohol consumption or sales are planned for the event, City Council Approval must be made prior to the filing of a street closure request. A fee is charged for the processing the request. If alcohol is to be served or consumed during the event, please submit the application six weeks prior to the event date. All Oregon Liquor Control Commission (OLCC) permits shall be obtained and requirements met, please contact the OLCC for requirements.

iii) The Applicant agrees to provide, at his/her own expense, barricades, signs, illumination, and other traffic control safety devices which may be required by the City. The applicant may rent City barricades, in lieu of providing their own. Staff can make them available prior to the event. If the applicant wishes staff to set up the barricades, additional fees may be charged.

iv) All public right-of-ways and private property will be left in the same general condition as existed prior to the event, including removal of debris, barricades and other devices used during the event. The Applicant, at the Applicant's expense, shall provide disposal drop containers and all other equipment.

v) The Temporary Street Closure Permit does not exempt the Applicant from any additional requirements that may be imposed by city, state, or federal law, nor is this list inclusive of all conditions that may be required.

vi) An application shall not be deemed complete unless it includes:

- Signed Rules of Conduct for Community Event Street Closure Permits.
- A site plan showing proposed streets to be closed and all items to be placed in the right-of-way. A minimum fifteen (15) feet wide emergency access lane shall be provided at all times.
- Complete Traffic Control Plan (TCP) indicating how you intend to redirect traffic around the event. The TCP and site plan may be submitted on the same drawing.
- Certificate of Insurance, naming the City of Mt. Angel as an additional insured for a minimum of one million dollars ($1,000,000) per occurrence. Private parties shall sign an agreement of liability and pay one hundred dollars $100 deposit.
- A notification form with signatures from representatives of abutting properties on the street to be closed. Please include: address, printed name, phone numbers and signatures.
- Reservation shall allow time for set up and clean up.
- Streets closed by permit must re-open at 10:00pm. Street closure requests for times after 10:00pm require council approval.

City of Mt. Angel

Notice of Street Closure Application

Please note: applicants for street closures are required to **notify** property owners/occupants abutting the proposed street closure only. They are **not** required to obtain approval.

Event Date: _____

Event Time (beginning and end): _____

Street to be closed (__St between __St. & ___St.): _____

Address of Abutting Property	Property Representative Name (please print)	Business Name (if applicable)	Signature	Ph #	Date

If you are unable to reach a representative of the abutting property in person, an email or signed letter from the representative including all the above information is also acceptable.

Form updated 3/2012