



**COUNTY OF EL DORADO  
DEPARTMENT OF TRANSPORTATION**



**APPLICATION FOR ROAD CLOSURE**

THIS APPLICATION MUST BE SUBMITTED AT LEAST 90 DAYS PRIOR TO THE ROAD CLOSURE DATE

APPLICATION RECEIVED BY: SW DATE: 2/11/13  
 TITLE OF EVENT: RUFF ROAD MILE AND 5K  
 TYPE OF EVENT: ROAD RACE  
 SPONSORING ORGANIZATION: OAK RIDGE HIGH SCHOOL TRACK & FIELD TEAM  
 ESTIMATED NUMBER OF PARTICIPANTS: 300+  
 DATE OF ROAD CLOSURE: SUNDAY MAY 5, 2013  
 START TIME: 7:00 AM COMPLETION TIME: 8:30 AM  
 ROAD(S) TO BE CLOSED: SELAND PARKWAY + SILVA VALLEY PARKWAY AND HARVARD WAY @ SILVA VALLEY  
 SUBMITTED BY: Bob Wright DATE: 2/11/13  
 CONTACT PERSON: SAME PHONE/FAX: 916-202-7201 cell  
 ADDRESS: 1120 HARVARD WAY EL DORADO HILLS 95762 Bwright@EDUHSd.net

**THE FOLLOWING CONDITIONS ARE REQUIRED FOR ALL ROAD CLOSURES:**

1. The organizers shall provide a detailed signing and detour plan for any proposed closure of a major county road. This signing/detour plan should identify the type and location of all signs, barricades, cones, and flaggers. The plan must be attached to this application when it is submitted for review.
2. The organizers shall provide proof that the owners of the adjacent business along the road closure are in agreement with proposed closure. These agreements must be attached to this application when it is submitted for review.
3. The organizers shall be responsible for providing all signs, barricades, cones, flaggers, and traffic controls and sanitation facilities.
4. Wooden barricades shall be placed across the County road to close the road. Barricades shall also be placed across all intersecting roads to deny access to the closed road.
5. A "ROAD CLOSED" sign shall be placed at each barricaded intersection. Each sign shall measure at least 48 inches by 30 inches, with 8 inch black letters on a white background.
6. The organizers shall remove all signs, all pavement markings or other materials immediately following the event. The organizers shall also remove all debris deposited by participants and spectators.
7. The organizers shall provide a Certificate of Insurance, naming County of El Dorado, its officers, officials, employees and volunteers additionally insured with the endorsement, in the amount of \$1,000,000.00 (one million dollars) as required by the El Dorado County Risk Manager.
8. To the fullest extent allowed by law the Organizer shall defend, indemnify, and hold the County harmless against and from any and all claims, suits, losses, damages, and liability for damages of every name, kind and description, including attorney's fees and costs incurred, brought for, or on account of, injuries to or death of any person, including but not limited to workers, County employees, and the public, or damage to property, or in anyway arise out of are connected with the work by the Organizer, his agents or employees including contractor's services, operation or performance hereunder, regardless of the existence or degree of fault or negligence on the part of the County, the Organizer, contractor, subcontractor(s) and employee(s) or any of these, except for part of the sole, or active negligence of the County, its officers and employees, or as expressly prescribed by statute. This duty of the Organizer to indemnify and save the County harmless includes the duties to defined set forth in California Civil Code Section 2778.

SIGNATURE/TITLE: Bob Wright RACE DIRECTOR DATE: 2/11/13  
TRICK COACH  
OAK RIDGE H.S.

**I HAVE READ, ACKNOWLEDGE AND AGREE TO ALL OF THE ABOVE CONDITIONS WITH REGARD TO THIS ROAD CLOSURE.**

# Ruff Road Mile and 5k Road Closure/Occupation request form

Course begins at point A – Corner of Serrano and Silva Valley Parkway

B is a left turn onto Harvard Way

C is a left turn onto Tah Nee Way

D is a right turn up Wodee Lane

Continue on Wodee past points F and G

G is a left turn onto the New York Creek Pedestrian path

H is the turn around spot

I is a right turn up Harvard Way

J is a right turn into the ORHS Parking lot and

K is the finish line.

## A-B-C-D-E-F-G-H-I-J-K – 3.1 miles total

Road occupation/closure request is for Silva Valley Rd. between Harvard and Serrano Parkway

Request is for the road to be closed at the intersection at point A and for Silva Valley Parkway to point B only – The intersection is the start of the race which will begin receiving runners at roughly 7am. Start line set up will be at this time also, race will begin promptly at 8 am. Runners will disperse at this time and be on Silva Valley Parkway for no more than 10 minutes as they travel north in the direction of Harvard Way.

The beginning of the race, down Silva Valley Parkway the road is a two lane (in each direction) road separated by a large median. The majority of the race will be taking place on the New York Creek pedestrian pavement, parallel to the EDH Blvd. – This is the course that has been used for years by our high school physical education department as they train students for a 5k run.

We expect that all runners will be off the course and out of the way of traffic within an hour of the start time.

1. All necessary barricade signs and flags have been donated by the Sacramento Running Association (SRA) – Contact person Alex Mansoor –
2. No business exist along the course
3. No road closures for the following intersections – however, temporarily, the following intersections will be impacted for a short time.

STAR volunteers have been obtained to monitor intersections at:

- On the west side of Silva at Golden Eagle Dr. (Between point A and B )  
Alternate exit is available within the gated community at Miralo Dr. and Serrano Prkwy
- On the east side of Silva Valley at Walker Dr. (Between point A and B )  
Alternate exit is available within the gated community at Pedra Dr.
- At point C Harvard and Tah Nee Rd. ,
- At point D Tah Nee Rd. and Wodee Dr., and
- At point G Wodee Dr. and El Dorado Hills Blvd.

4, 5, and 6. We are soliciting help from a professional group of race organizers. The SRA has generously offered to provide signage, barricades cones and flags used for the California International Marathon

7. See attached. Original is in the mail

8. Signed and dated by race director : Bob Wright Oak Ridge Track and Field

CHP will be on site at start of Race



To see all the details that are visible on the screen, use the "Print" link next to the map.



## Ruff Road Mile and 5k Road Race

Course begins at point A – Corner of Serrano and Silva Valley Parkway

C is a left turn into the ORHS parking lot

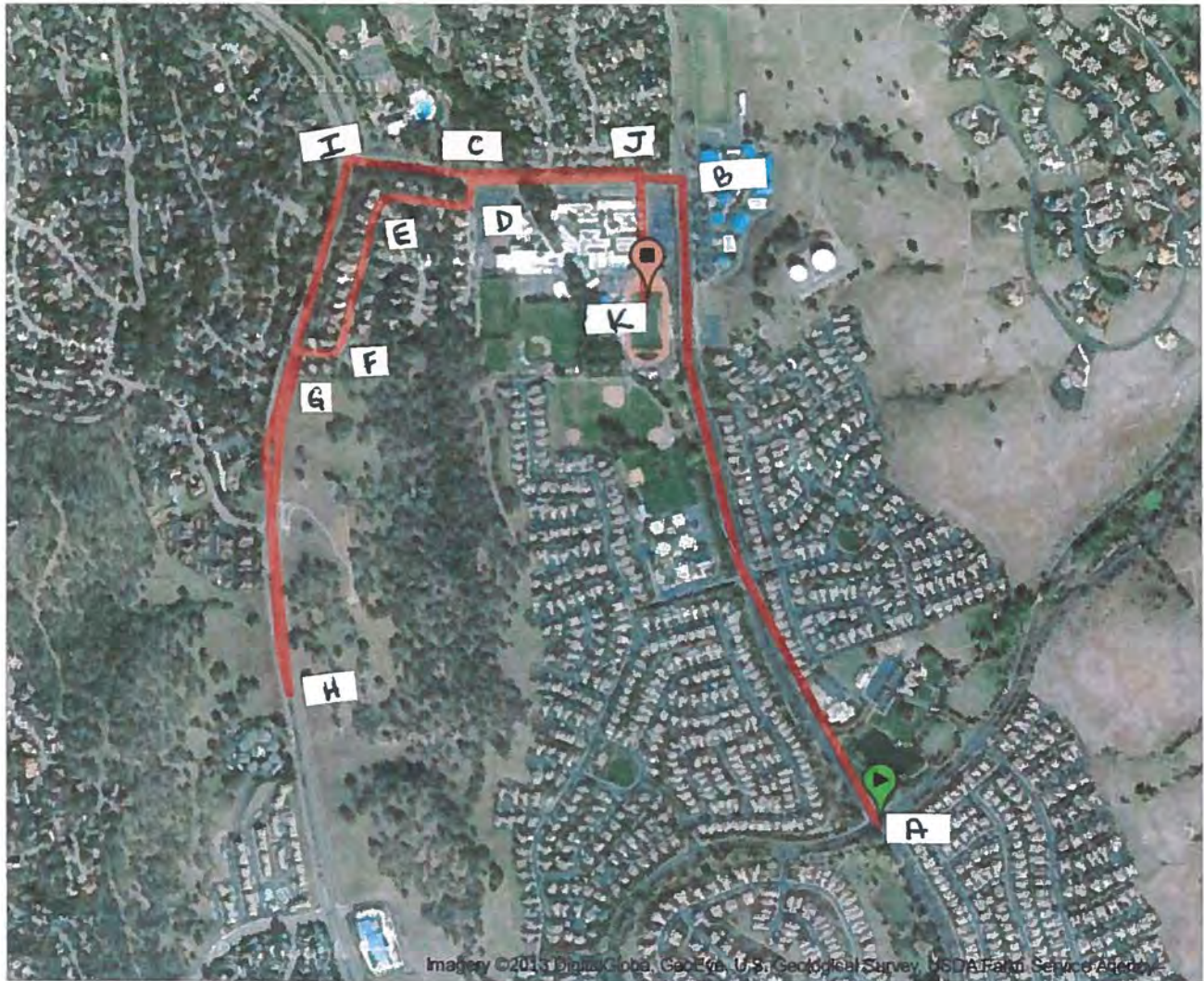
B is a left turn onto Harvard Way

D is the finish line in the stadium

### A-B-C-D 1.0 miles total



To see all the details that are visible on the screen, use the "Print" link next to the map.



## Ruff Road Mile and 5k Road Race

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G is a left turn onto the New York Creek Pedestrian path

H is the turn around spot

I is a right turn up Harvard Way

J is a right turn into the ORHS Parking lot and

K is the finish line.

**A-B-C-D-E-F-G-H-I-J-K – 3.1 miles total**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/06/13

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Cummins Insurance Agency, Inc. License # OC42488 4401 Hazel Avenue, Suite 110 Fair Oaks, CA 95628 Cummins Insurance Agency, Inc.	916-961-8000	<b>CONTACT NAME:</b>	
	916-961-3046	<b>PHONE (A/C, No, Ext):</b>	<b>FAX (A/C, No):</b>
		<b>E-MAIL ADDRESS:</b>	
<b>INSURER(S) AFFORDING COVERAGE</b>			<b>NAIC #</b>
INSURER A : Nonprofits' Insurance Alliance			
INSURER B :			
INSURER C :			
INSURER D :			
INSURER E :			
INSURER F :			

**INSURED**  
Oak Ridge High School Sports B  
1120 Harvard Way  
El Dorado Hills, CA 95762

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDC/SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b>	X	201 203434 NPO	05/08/12	05/08/13	EACH OCCURRENCE \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person) \$ 20,000
	<input checked="" type="checkbox"/> Liquor Lia.					PERSONAL & ADV INJURY \$ 2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER						GENERAL AGGREGATE \$ 2,000,000
<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						PRODUCTS - COMPROP AGG \$ 2,000,000
<b>AUTOMOBILE LIABILITY</b>						COMBINED SINGLE LIMIT (Ea accident) \$
<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
<input type="checkbox"/> SCHEDULED AUTOS						\$
<input type="checkbox"/> NON-OWNED AUTOS						\$
<input type="checkbox"/> UMBRELLA LIAB						EACH OCCURRENCE \$
<input type="checkbox"/> EXCESS LIAB						AGGREGATE \$
<input type="checkbox"/> OCCUR						\$
<input type="checkbox"/> CLAIMS-MADE						\$
<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						\$
<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>						WC STATUTORY LIMITS <input type="checkbox"/> OTH. FR. <input type="checkbox"/>
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A						E.L. EACH ACCIDENT \$
If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
						E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Ref: Running Race May 5, 2013  
Additional insured: County of El Dorado, its officers, officials, employees and volunteers per attached

<b>CERTIFICATE HOLDER</b>	<b>CANCELLATION</b>
ELDORA3  El Dorado County Risk Management 330 Fair Lane Placerville, CA 95667	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE <i>Debbie Curran</i>

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

**SCHEDULE**

Name Of Additional Insured Person(s) Or Organization(s):	Location(s) Of Covered Operations
Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.	All insured premises and operations
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

**A. Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

**B.** With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.