



# COUNTY OF EL DORADO

# DEPARTMENT OF TRANSPORTATION

MAINTENANCE DIVISION  
2441 Headington Road  
Placerville, CA 95667  
Phone: (530) 642-4909  
Fax: (530) 642-9238

Jim Ware, P.E.  
Director of Transportation

MAIN OFFICE  
2850 Fairlane Court  
Placerville, CA 95667  
Phone: (530) 621-5943  
Fax: (530) 621-2030



January 27, 2010 **"Originally applied on 1-7-2010"**

Subject: **"REVISED, NEW ROUTE"** Application for Road Closure  
"Mitokids Walk "

In accordance with Section 12.37.090 of the El Dorado County Ordinance Code, the Department of Transportation respectfully requests your review.

The Oak Ridge National Honor Society will be sponsoring this event. The road closure is scheduled for Saturday, March 13, 2010 from 7:00 AM to 11:00 AM. The closure will be from the Intersection of Harvard Way and Clermont Way to the Intersection of Silva Valley Parkway and Walker Dr.

If you have any comments or concerns with this event, please respond to the contact person on the application and forward a copy to my attention at Land Development and Discretionary Review. If I do not receive comments by February 5, 2010, I will assume your agency has no objection and the road closure will go to the Board of Supervisors for their approval.

Sincerely,  
Shellie Baker  
Development Technician  
Land Development and Discretionary Review



**COUNTY OF EL DORADO  
DEPARTMENT OF TRANSPORTATION**



**APPLICATION FOR ROAD CLOSURE**

THIS APPLICATION MUST BE SUBMITTED AT LEAST 60 DAYS PRIOR TO THE ROAD CLOSURE DATE

APPLICATION RECEIVED BY: Shen Woodford DATE: \_\_\_\_\_  
 TITLE OF EVENT: Mitokids walk  
 TYPE OF EVENT: non Fundraiser walk  
 SPONSORING ORGANIZATION: Oak Ridge National Honor Society  
 ESTIMATED NUMBER OF PARTICIPANTS: 200  
 DATE OF ROAD CLOSURE: march 13th, 2016 Saturday  
 START TIME: 7:00 am COMPLETION TIME: 11:00 am  
 ROAD(S) TO BE CLOSED: Silva Valley and Harvard way

NOTE: THE ATTACHED SUPPLEMENTAL SHEET AND SKETCH SHALL BE COMPLETED IF MORE THAN ONE COUNTY ROAD IS TO BE CLOSED

SUBMITTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_  
 CONTACT PERSON: Addison Duane PHONE/FAX: 916-365-3134  
 ADDRESS: 6218 Edgehill Drive, El Dorado Hills, CA 95762

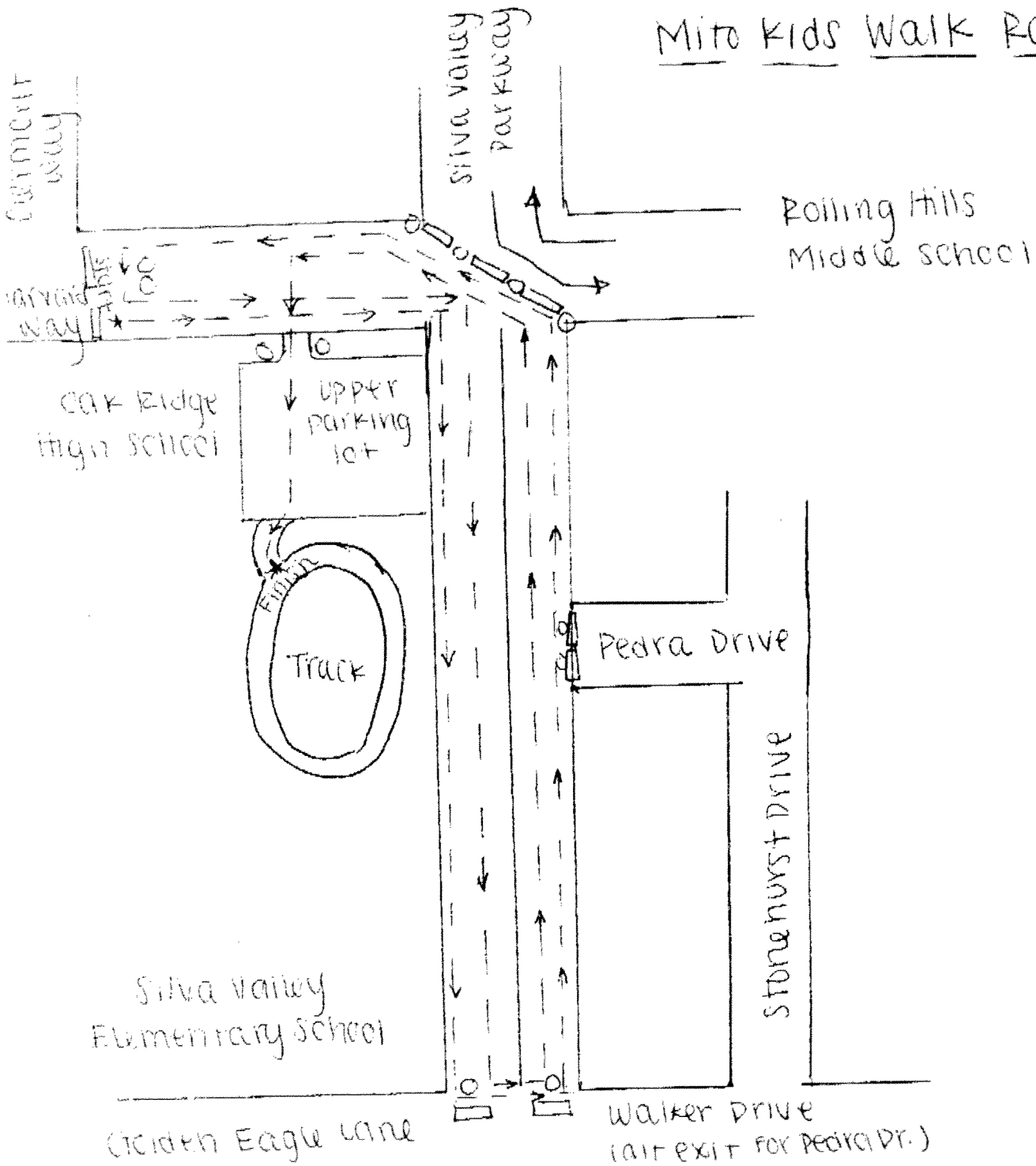
**THE FOLLOWING CONDITIONS ARE REQUIRED FOR ALL ROAD CLOSURES:**

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.
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 El Dorado County Department of Transportation additionally insured, 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: \_\_\_\_\_ DATE: 12-4-09

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

# Mito Kids Walk ROUTE



# SUPPLEMENTAL SHEET FOR ROAD CLOSURES AND PARADES

STARTING TIME: <u>7:30</u>	COMPLETION TIME: <u>10:30</u>
<u>Harvard Way</u>	BETWEEN <u>Vermont and Silva Valley Parkway</u>
STARTING TIME: <u>7:30</u>	COMPLETION TIME: <u>10:30</u>
<u>Silva Valley Parkway</u>	BETWEEN <u>Harvard Way and Walker Dr.</u>
STARTING TIME: _____	COMPLETION TIME: _____
_____	BETWEEN _____
STARTING TIME: _____	COMPLETION TIME: _____
_____	BETWEEN _____
STARTING TIME: _____	COMPLETION TIME: _____
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STARTING TIME: _____	COMPLETION TIME: _____
_____	BETWEEN _____
STARTING TIME: _____	COMPLETION TIME: _____
_____	BETWEEN _____

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/8/2009

**PRODUCER**  
Wells Fargo of California Insurance Services, Inc.  
1039-A North McDowell Blvd.  
Petaluma, CA 94954  
707-773-2900

**INSURED**  
El Dorado Union High School District  
Schools Insurance Authority  
c/o P.O. Box 276710  
Sacramento, CA 95827

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Schools Insurance Authority JPA	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

**COVERAGES**

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS								
A		<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	Ref.No.2009MOLC	07/01/2009	07/01/2010	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/OP AGG \$								
		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$								
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$								
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$								
		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<table border="1"> <tr> <td>WC STATU-TORY LIMITS</td> <td>OTH-ER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> </tr> </table>	WC STATU-TORY LIMITS	OTH-ER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$
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E.L. EACH ACCIDENT	\$													
E.L. DISEASE - EA EMPLOYEE	\$													
E.L. DISEASE - POLICY LIMIT	\$													
		<b>OTHER</b>												

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS**  
 Re: Access to county streets by Oakridge High School on March 13, 2010, for a fundraiser.

<b>CERTIFICATE HOLDER</b>  County of El Dorado Department of Transportation 2850 Fairlane Court Placerville, CA 95667	<b>CANCELLATION</b> Ten Day Notice for Non-Payment  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
	AUTHORIZED REPRESENTATIVE <i>Ann Callahan</i>

## **IMPORTANT**

If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

## **DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.