



**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: \_\_\_\_\_ DATE: \_\_\_\_\_  
 TITLE OF EVENT: 4 Wheel Drive Event Jeepers Jamboree & Jeep Jamboree  
 TYPE OF EVENT: 4 Wheel Drive Event  
 SPONSORING ORGANIZATION: Jeepers Jamboree  
 ESTIMATED NUMBER OF PARTICIPANTS: 800 people - 400 vehicles  
 DATE OF ROAD CLOSURE: Wed. July 22nd thru Mon. July 27 & Thur. July 30 thru Mon. August 3rd.  
 START TIME: 6:00 AM COMPLETION TIME: 12:00 AM  
 ROAD(S) TO BE CLOSED: Lubicon Trail Road from Wentworth Sprites & Lion Lake to Berle Creek & thence east to Placer County line.  
 NOTE: THE ATTACHED SUPPLEMENTAL SHEET AND SKETCH SHALL BE COMPLETED IF MORE THAN ONE COUNTY ROAD IS TO BE CLOSED  
 SUBMITTED BY: Jeepers Jamboree DATE: 2/17/2009  
 CONTACT PERSON: Joely Spillers PHONE/FAX: P. 530-333-4771 F. 530-333-0245  
 ADDRESS: 6275 Main Street, P.O. Box 900 Georgetown, CA 95634

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

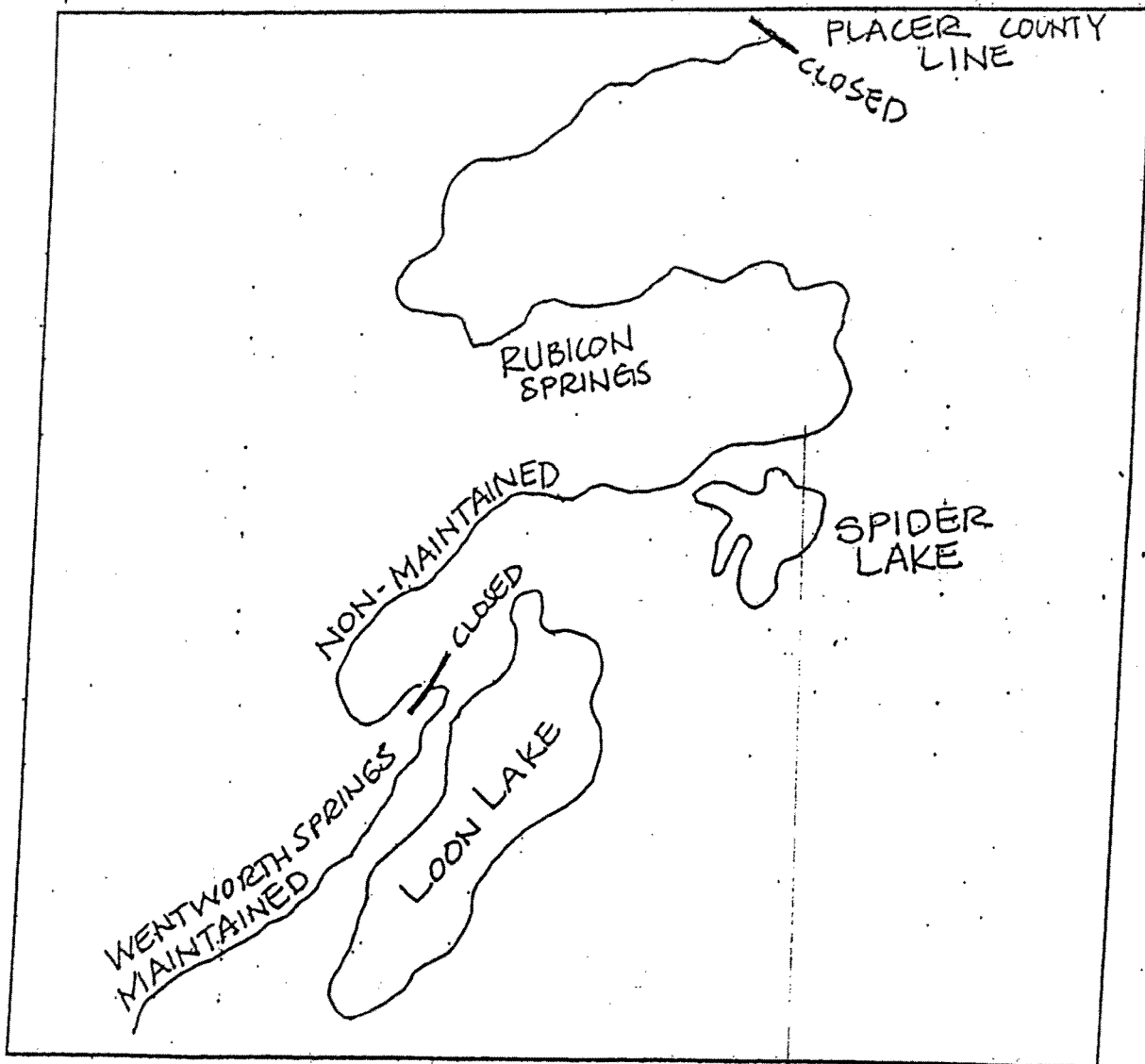
1. The organizers shall provide a detailed signing and detour plan for any proposed closure of a major county road. This signing/detour plan should identify the type and location of all signs, barricades, cones, and flaggers. The plan must be attached to this application when it is submitted for review.
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 or 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: Joely Spillers DATE: 2/17/2009

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

### SKETCH

(To be completed if more than one County Road is to be closed)



#### INSTRUCTIONS:

1. Sketch all roads to be closed and label roads by name.
2. Indicate all intersecting public roads along route.
3. Indicate "START" and "FINISH" locations of event.
4. Indicate direction of travel for the participants.

#### NOTE:

This sketch may serve as the "SIGNING/DETOUR PLAN" if it clearly identifies the type and location of all proposed signs, barricades, cones, and flaggers.



SCOTTSDALE INSURANCE COMPANY®

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
SUPPLEMENTAL DECLARATIONS

Policy No. CLS1546647 Effective Date 12/01/2008  
12:01 A.M., Standard Time

Named Insured JEEPERS JAMBOREE & JEEP JAMBOREE INC Agent No. 04071

Item 1. Limits of Insurance	
Coverage	Limit of Liability
Aggregate Limits of Liability	Products/ Completed Operations Aggregate \$ <u>2,000,000</u>
	General Aggregate (other than Products/ Completed Operations) \$ <u>2,000,000</u>
Coverage A - Bodily Injury and Property Damage Liability	any one occurrence subject to the Products/ Completed Operations and General Aggregate Limits of Liability \$ <u>1,000,000</u>
Damage to Premises Rented to You Limit	any one premises subject to the Coverage A occurrence and the General Aggregate Limits of Liability \$ <u>100,000</u>
Coverage B - Personal and Advertising Injury Liability	any one person or organization subject to the General Aggregate Limits of Liability \$ <u>1,000,000</u>
Coverage C - Medical Payments	any one person subject to the Coverage A occurrence and the General Aggregate Limits \$ <u>5,000</u>
Item 2. Description of Business	
Form of Business: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Trust <input type="checkbox"/> Limited Liability Company <input checked="" type="checkbox"/> Organization including a corporation (other than Partnership, Joint Venture or Limited Liability Company)	
Location of All Premises You Own, Rent or Occupy: PER LOCATIONS SCHEDULE	
Item 3. Forms and Endorsements	
Form(s) and Endorsement(s) made a part of this policy at time of issue: See Schedule of Forms and Endorsements	
Item 4. Premiums	
Coverage Part Premium:	\$ 3,905
Other Premium:                    ADDITIONAL INSURED FULLY EARNED	\$ 200
Total Premium:	\$ 4,105

THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.





**SCOTTSDALE INSURANCE COMPANY®**  
**SCHEDULE OF FORMS AND ENDORSEMENTS**

Policy No. CLS1546647 Effective Date: 12/01/2008  
 12:01 A.M., Standard Time

Named Insured JEEPERS JAMBOREE & JEEP JAMBOREE INC Agent No. 04071

**COMMON FORMS**

UTS-COVPG 1-08	Cover Page
OPS-D-1 12-00	Common Policy Declarations
UTS-SP-2 12-95	Schedule Of Forms and Endorsements
UTS-SP-3 8-96	Locations Schedule
UTS-85g 2-98	Animal Excl

**GENERAL LIABILITY FORMS**

CLS-SD-1L 8-01	GL Supplemental Dec
CLS-SP-1L <del>10-93</del>	<del>GL-Ext Supplemental Dec</del>
CG 00 01 12-07	General Liab Cov
CG 20 02 11-85	AI-Club Members
CG 20 11 1-96	AI-Managers or Lessors of Prem
CG 21 01 11-85	Excl-Athletic-Sports Partic
CG 21 16 7-98	Excl-Designated Prof Services
CG 21 44 7-98	Designated Premises Limitation
CG 21 73 1-08	Exclusion-Certified Acts Of Terrorism
CG 24 07 1-96	Prod-Comp Ops Haz Redefined
CG 24 26 7-04	Amend Of Insured Contract Definition
GLS-5s 4-08	Special Event Participant Excl
GLS-106s 5-93	Total Liquor Liab Excl
GLS-223s 9-99	Spec Event Cov-Mobile Equip
GLS-227s 2-07	Assault And/Or Battery Excl
GLS-289s 11-07	Known Injury/Dmg Excl-Personal/Advertise Injury
UTS-128s 10-07	Optional Provisions Endt
UTS-246s 12-07	Amend Endts No Med Pay Excl

**STATE FORMS**

CG 32 34 1-05	CA-Changes
UTS-253-CA 1-97	CA-Amendatory Endorsement

**ADDITIONAL FORMS**

SLA-D2 (1-1-2008)

COMMON POLICY DECLARATIONS

RENEWAL OF  
CLS1444823



SCOTTSDALE INSURANCE COMPANY®

Policy Number  
CLS1546647

Home Office:

One Nationwide Plaza ▪ Columbus, Ohio 43215

Administrative Office:

8877 North Gainey Center Drive ▪ Scottsdale, Arizona 85258

1-800-423-7675

A STOCK COMPANY

**ITEM 1. Named Insured and Mailing Address**

JEEPERS JAMBOREE & JEEP JAMBOREE INC  
P O BOX 900  
GEORGETOWN, CA 95634

**Agent Name and Address**

BURNS & WILCOX, LTD.  
200 BURNS & WILCOX CENTER  
7575 N. PALM AVENUE  
FRESNO, CA 93711

Agent No.: 04071

Program No.: CT/AT

**ITEM 2. Policy Period**

From: 12/01/2008

To: 12/01/2009

Term: 365 DAYS

12:01 A.M., Standard Time at your mailing address.

Business Description: SPONSOR OF TWO JEEP JAMBOREES PER YEAR

In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy. This policy consists of the following coverage parts for which a premium is indicated. Where no premium is shown, there is no coverage. This premium may be subject to adjustment.

Coverage Part(s)	Premium
Commercial General Liability Coverage Part	\$ 4,105
Commercial Property Coverage Part	\$ NOT COVERED
Commercial Crime Coverage Part	\$ NOT COVERED
Commercial Inland Marine Coverage Part	\$ NOT COVERED
Commercial Auto (Business Auto or Truckers) Coverage Part	\$ NOT COVERED
Commercial Garage Coverage Part	\$ NOT COVERED
Professional Liability Coverage Part	\$ NOT COVERED
	\$
	\$
<b>Total Policy Premium:</b>	\$ 4,105.00
POLICY FEE FULLY EARNED	\$ 250.00
	\$
SURPLUS LINES TAX	\$ 130.65
STAMPING FEE	\$ 5.44
<b>TOTAL</b>	<b>\$ 4,491.09</b>
	\$

Form(s) and Endorsement(s) made a part of this policy at time of issue:

**SEE SCHEDULE OF FORMS AND ENDORSEMENTS**

K. ANDERSON

THIS COMMON POLICY DECLARATION AND THE SUPPLEMENTAL DECLARATION(S), TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART(S), COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, COMPLETE THE ABOVE NUMBERED POLICY.