

5306212030

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: Marcia Mays DATE: 8-8-12
TITLE OF EVENT: Oak Ridge High School Homecoming Parade
TYPE OF EVENT: Annual School Parade through Home Stonegate Village
SPONSORING ORGANIZATION: Oak Ridge High School Associated Student Body
ESTIMATED NUMBER OF PARTICIPANTS: 400
DATE OF ROAD CLOSURE: 11-2-12, Friday November 2, 2012
START TIME: 4pm COMPLETION TIME: 5pm
ROAD(S) TO BE CLOSED: Harvard Way, Clermont Way, Brisbane Circle, St. Andrews Drive (within El Dorado Hills)

SUBMITTED BY: Marcia Mays DATE: 8-8-12
CONTACT PERSON: Marcia Mays PHONE/FAX: 916 933 6950 x 3046
ADDRESS: 1120 Harvard Way El Dorado Hills, CA 95762
mmay@a-eduhsd.net

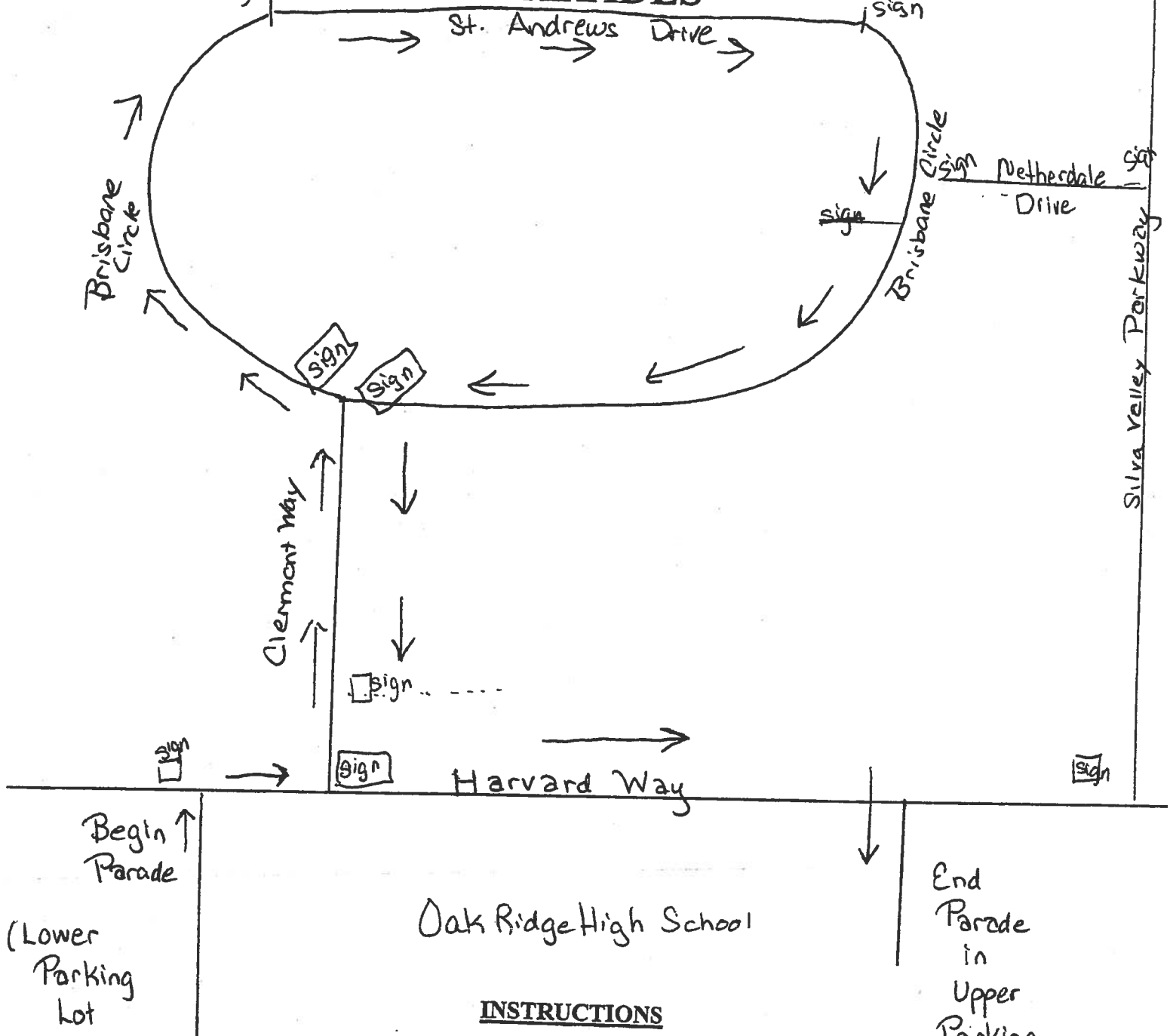
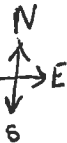
THE FOLLOWING CONDITIONS ARE REQUIRED FOR ALL ROAD CLOSURES:

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, 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: Marcia Mays DATE: 8-8-12

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

SKETCH FOR ROAD CLOSURES AND PARADES



INSTRUCTIONS

1. Sketch all roads to be occupied and label roads name.
2. Indicate all intersecting public roads along route.
3. Indicate "START" and "FINISH" location 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 sign, barricades, cones, and flaggers.

SUPPLEMENTAL SHEET FOR ROAD CLOSURES AND PARADES

STARTING TIME: <u>4:00</u>		COMPLETION TIME: <u>4:05</u>
<u>Harvard Way - lower Parking</u> <u>(west)</u>	BETWEEN	<u>Harvard Way & Clermont</u>
STARTING TIME: <u>4:05</u>		COMPLETION TIME: <u>4:10</u>
<u>Clermont Way</u>	BETWEEN	<u>Harvard & Brisbane Circle</u>
STARTING TIME: <u>4:10</u>		COMPLETION TIME: <u>4:15</u>
<u>Brisbane Circle</u>	BETWEEN	<u>Clermont & St. Andrew's Drive</u>
STARTING TIME: <u>4:15</u>		COMPLETION TIME: <u>4:20</u>
<u>St. Andrews</u>	BETWEEN	<u>Brisbane Circle (W) & Brisbane Circle (E)</u>
STARTING TIME: <u>4:20</u>		COMPLETION TIME: <u>4:40</u>
<u>Brisbane Circle</u>	BETWEEN	<u>St. Andrew's & Clermont</u>
STARTING TIME: <u>4:40</u>		COMPLETION TIME: <u>4:50</u>
<u>Clermont Way</u>	BETWEEN	<u>Brisbane Circle & Harvard Way</u>
STARTING TIME: <u>4:50</u>		COMPLETION TIME: <u>5:00</u>
<u>Harvard Way</u>	BETWEEN	<u>Clermont Way & Silver Valley Drive</u>
STARTING TIME: _____		COMPLETION TIME: _____
_____	BETWEEN	_____
STARTING TIME: _____		COMPLETION TIME: _____
_____	BETWEEN	_____
STARTING TIME: _____		COMPLETION TIME: _____
_____	BETWEEN	_____
STARTING TIME: _____		COMPLETION TIME: _____
_____	BETWEEN	_____
STARTING TIME: _____		COMPLETION TIME: _____
_____	BETWEEN	_____



SCHOINSU

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
9/18/2012

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).

PRODUCER Wells Fargo Insurance Services USA, Inc. 1039-A North McDowell Blvd. Petaluma, CA 94954 707-773-2900	CONTACT NAME: _____															
	PHONE (A/C, No, Ext): _____	FAX (A/C, No): _____														
E-MAIL ADDRESS: _____																
INSURED Schools Insurance Authority El Dorado Union High School District c/o P.O. Box 276710 Sacramento, CA 95827		<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Schools Insurance Authority JPA</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Schools Insurance Authority JPA		INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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INSURER E:																
INSURER F:																

COVERAGES

CERTIFICATE NUMBER: 4857995

REVISION NUMBER: See below

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	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY		2012MOLC	07/01/2012	07/01/2013	EACH OCCURRENCE \$ 1,000,000
	<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					
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A				WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 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)

CG 20 11 11 85 Re: County of El Dorado, its officers, officials, employees and volunteers are named as additional insured, but only as to the liability arising out of the negligent acts of the Covered Member, with respect to access to county streets by Oakridge High School on November 2, 2012, for the Homecoming Parade.

CERTIFICATE HOLDER

County of El Dorado
 2850 Fair Lane Ct
 Placerville, CA 95667

CANCELLATION

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

The ACORD name and logo are registered marks of ACORD

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ACORD 25 (2010/05)

(This certificate replaces certificate# 4857060 issued on 9/18/2012)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED—MANAGERS OR LESSORS OF PREMISES

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

SCHEDULE

- 1. Designation of Premises (Part Leased to You):
- 2. Name of Person or Organization (Additional Insured): County of El Dorado
2850 Fair Lane Ct
Placerville, CA 95667
- 3. Additional Premium:

(If no entry appears above, the information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule but only with respect to liability arising out of the ownership, maintenance or use of that part of the premises leased to you and shown in the Schedule and subject to the following additional exclusions:

This insurance does not apply to:

- 1. Any "occurrence" which takes place after you cease to be a tenant in that premises.
- 2. Structural alterations, new construction or demolition operations performed by or on behalf of the person or organization shown in the Schedule.

Re: County of El Dorado, its officers, officials, employees and volunteers are named as additional insured, but only as to the liability arising out of the negligent acts of the Covered Member, with respect to access to county streets by Oakridge High School on November 2, 2012, for the Homecoming Parade.