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

	c	CLOSURE L	.A.I.E.	01-1			
APPLICAT	ION RECEIVED BY	N	DATE:	8 5	0		
TITLE OF	1 -	al . 0 1 75			***************************************		
TYPE OF E			<u></u>				
	ING ORGANIZATION:	Cocontaco	- Rosan				
			E POI MI				A STATE OF THE PARTY OF THE PAR
	D NUMBER OF PARTICIPANT		1610 Sa	cturday		***************************************	
		COMPLETI		Far		·	The second secon
START TI		COMPLETI	ON THIE	-47-	***		
RUAD(S)	TO BE CLOSED:					arana da anticolor de la compansión de la c	
5.100 mm	<u> </u>	U CUEET AND CU	TTCU CHALL D	E COMPLE	TED IC	MODETL	IAN
			EICH SHALL D	E COMPLE	ו בטור	MOKE II	17514
	NTY ROAD IS TO BE CLOSED) -i.	DATE.	12/4	lio		
SUBMITTE			DATE:			4334	NEF
		2	PHONE/FAX:				72 fav
ADDRESS	: POBLY 464 C	errouserous		٣٠٠٠		3 68 -0	
					_		832 al
	THE FOLLOWII	ng condit	ions are	: REQU	IREL	FOR	
		ALL ROAD	CLOSURE	S:			
1.	The organizers shall provid				av nene	need dos	sure of a
	major county road. This si	aning/detaur plan	should Identif	fy the type	and In	reation of	alí sinns
	barricades, cones, and flag	gamy/decour plan gare. The plan m	uet he attache	d to this a	nolicat	ion whan	It is
	submitted for review.	gers. The plant if	iost be dedecite	u (0 0,115 0	Ppiicat	IOH WITCH	16 15
2.	The organizers shall provid	a proof that the c	wmare of the a	Hiscont hi	icinace	along the	road clocura
۷.	are in agreement with prop	e prout that the t	miliera on line a	te must be	attach	ad to this	: annlication
	when it is submitted for rev		ese agreemen	rs most ne	attati	ica to tina	application
5	The organizers shall be res	new. nendible for provi	dina all clane	harricades	cone	- finance	and traffic
3.		housing to bloss	umu ali signs,	Darricades	, cone	, nagget	s, and craine
	controls. Wooden barricades shall be	nlaced across th	a County road	to close th	e mad	Rarrica	dec chall aice
4.	be placed across all interse	cting roads to de	ny arcess to th	e closed m	nad nad	. Darrag	acs shall also
•	A "ROAD CLOSED" sign sha	all he nieced at as	ich harricaded	intersection	on Fac	rh eian eh	all measure
5.	at least 48 inches by 30 inches	the with 8 inch	hlack letters or	n a white t	ackara	an signi sit	on measure
~	The arganizant chall remove	e all sinns all na	vement markin	as or othe	r mate	rials imm	ediately
6.	following the event The o	e organizers shall <u>remove</u> all signs, all pavement markings or other materials immediately in the event. The organizers shall also <u>remove</u> all debris deposited by participant			ants and		
		iganizera anun ui.	so <u>remove</u> an e	conc cope	MICCO L	y paracip	and and
-	spectators. The organizers shall provid	a a Certificate of	Insurance nar	ning El Do	rado Co	nunty Der	artment of
7.	Transportation additionally	incured in the a	mount of \$1.00	00.000.00	(one m	illion doll	ars) as
	required by the El Dorado	County Disk Mana	ner	30,00 0,00	10110 11		ALSEL OF
^	To the fullest extent allower	d by law the Ora	anizer shall det	fend, inder	nnify. a	and hold t	he County
8.	harmless against and from	mish ils bas vas	is suits insses	. damages	and I	iability for	r damages of
	every name, kind and desc	rintion including	attornev's feed	and costs	incurr	ed. broug	ht for, or on
	account of, injuries to or de	anth of any naren	n including hu	t not limit	ed to w	rorkers. C	ounty
	employees, and the public,	or domage to pe	n, moraumy va anarty ar in at	navav aris	a nuit n	f are cont	ected with
	the work by the Organizer,	or damage to pri	opercy, or medical	ina contra	ctore e	amiliae A	neration or
	the work by the Organizer, performance hereunder, re	nis agents or em	pioyees includ	ree of faul	torna	allaence c	n the nart of
	the County, the Organizer,	gardiess of the ex	derence of dea	d ampliance	ale los	any of th	ace excent
	the County, the Organizer, for part of the sole, or activ	contractor, Subco	muracion(s) an	officers an	d amni	maps of	as expressiv
	for part of the sole, or active prescribed by statute. This	re negligence of t	ne county, its	inify and e	ave the	County h	narmless
	prescribed by statute. Ins	s duty of the Orga	difornia Civil O	nde Sertin	n 2778	. Country :	Tame () 4 to an an an
	includes the duties to derin	eu set iorai in Ce	morma Gvn G	Jul 2000			1
CTCN	TIPE POS				DAT	: 8h	

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

Parade of lights School ST. - temporary
Detour
For Parade Park · Park RR Stamp Mill - Parade Staging Post office Orleans Shemf office Marchies Garage Fire Placer Church Traffic delay - slow during parade IDOF 193 193 KANI 10-1007.A.2

	CORD, CERTIFI	CATE OF LIAB				Aug	ATE (MM/DD/YYYY) ust 17, 2010			
PRODU	JCER LOCKTON COMPANIES, LLC-K 525 W. Monroe, Suite 600 CHICAGO IL 60661 (312) 669-6900	CHICAGO	ONLY AND HOLDER.	D CONFERS NO THIS CERTIFICA	UED AS A MATTER OF RIGHTS UPON THE C ATE DOES NOT AMEN AFFORDED BY THE PO	ERTI D, E	FICATE KTEND OR			
				INSURERS AFFORDING COVERAGE						
INSURED All Active US Rotary Clubs & Districts				INSURER A: ACE American Insurance Company						
Attn: Risk Management Department				INSURER B: ACE Property & Casualty Insurance Co						
1560 Sherman Ave.			INSURER C:							
	Evanston IL 60201-3698		INSURER D:	***************************************		-+				
	*		INSURER E:							
COVE	RAGES			HIS CERTIFICATE OF INSU	RANCE DOES NOT CONSTITUTE A CREPRESENTATIVE OR PRODUCER A	CONTRA	CT BETWEEN THE ISS			
ANY MAY	POLICIES OF INSURANCE LISTED BE REQUIREMENT, TERM OR CONDITIO PERTAIN, THE INSURANCE AFFORDI ICIES. AGGREGATE LIMITS SHOWN M	N OF ANY CONTRACT OR OTHER ED BY THE POLICIES DESCRIBED	INSURED NAMED A DOCUMENT WITH I HEREIN IS SUBJECT	ABOVE FOR THE PORESPECT TO WHICH	OLICY PERIOD INDICATED	D. NO	TWITHSTANDING			
INSR L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	Lim	ITS				
	GENERAL LIABILITY		J2(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DATE (MAGGE) (1)	EACH OCCURRENCE	T _s	2.000.000			
Α	X COMMERCIAL GENERAL LIABILITY	PMIG23861355	7/1/2010	7/1/2011	DAMAGE TO RENTED PREMISES (Ea occurence)	s	500,000			
	CLAIMS MADE X OCCUR	Single-			MED EXP (Any one person)	\$	XXXXXXX			
	X Liquor Liability				PERSONAL & ADV INJURY	s	2,000,000			
	Included				GENERAL AGGREGATE	\$	10,000,000			
	GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG	+	4,000,000			
	X POLICY PRO-					<u> </u>				
A	AUTOMOBILE LIABILITY ANY AUTO	PMIG23861355	7/1/2010	7/1/2011	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000			
	ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	\$	xxxxxx			
	X HIRED AUTOS X NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$	xxxxxxx			
					PROPERTY DAMAGE (Per accident)	\$	xxxxxxx			
- 1	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	XXXXXXX			
	ANY AUTO	NOT APPLICABLE			OTHER THAN EA ACC	\$	XXXXXXX			
	EXCESS/UMBRELLA LIABILITY				AGG	\$	XXXXXXX			
в	X OCCUR CLAIMS MADE	N (0,052,4002	7/1/2010	7/1/2011	EACH OCCURRENCE	\$	5,000,000			
'	CLAIMS MADE	M00534092	7/1/2010	7/1/2011	AGGREGATE	\$	10,000,000			
- 1	DEDUCTIBLE X UMBRELLA FORM			ŀ		\$	XXXXXXX			
	1 1			-		\$	XXXXXXX			
180	RETENTION \$ ORKERS COMPENSATION AND				WC STATU- OTH- TORY LIMITS ER	\$	XXXXXXX			
EM	PLOYERS' LIABILITY	NOT APPLICABLE				 	37373737373737			
	Y PROPRIETOR/PARTNER/EXECUTIVE FICER/MEMBER EXCLUDED?			F	E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE	\$	XXXXXXX			
	es, describe under ECIAL PROVISIONS below			-	E.L. DISEASE - POLICY LIMIT	\$	XXXXXXX			
	HER				E.C. DISPASE - POLICE LIMIT	3	XXXXXXX			
ESCRIPT	TION OF OPERATIONS / LOCATIONS / VEHICLE	ES / EXCLUSIONS ADDED BY ENDORSEM	IENT / SPECIAL PROVIS	ions		**********				
erms	Certificate Holder is included and conditions of the General in whole or in part by the	eral Liability policy, but	only to the ex-							
ERTIF	CATE HOLDER		CANCELLATION	ON		*****				
	e vor x = 3. Sun 3. P Sur				D DOLLARD DE ALLARD					
				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION						
I Dorado County				DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN						
	airlane Ct.		NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL							
Placerville, CA 95667				IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.						
			A SAMPLE CONT. AND ADD.	7 / 1						
CORD	25 (2001/08) For questions regarding the	is certificate, contact the number Sated in the P	reducer' section above and a	marifu the client code 1807	® ACORD CO	nn.	OATION JOSS			