

CITY OF CHILLICOTHE
SERVICE DEPARTMENT
STREET/ALLEY
SIDEWALK/PARKING SPACE
CLOSURE PERMIT

DATE: _____ Permit # _____

LOCATION: _____ (Street to be closed)

(From) _____ (To) _____

DATE OF EVENT: _____ TIME OF CLOSURE: _____

EVENT: _____

RESPONSIBLE AGENCY/AGENT: _____
(Printed Name)

In consideration for said permit the undersigned agrees as follows:

1. That said permit may be revoked at any time by the City of Chillicothe, Ohio, or by the Service Director.
2. Applicant will erect adequate protective devices to protect persons and vehicles passing said area from damage due to said construction work and also provide or erect adequate and safe passageways around said blocked off area, and to properly light said area, all of which shall be done and maintained at all times said area is blocked off to the satisfaction of the Service Director or such person as he shall appoint to act for him.
3. Applicant will hold the City of Chillicothe harmless from all damages, liability or suits for damages resulting from the blocked off area and use of said sidewalks and streets involved and the maintenance of any temporary passageways or for any other cause connected with or resulting from said temporary use of said sidewalks and streets.
4. Applicant will pay the sum of \$2.00 for this permit and an additional \$1.00 per day for each parking space/meter whose operation is suspended by this permit. Said sum to be paid at the office of the Service Director

RESPONSIBLE AGENT/AGENCY SIGNATURE

DATE

Permit is hereby granted as described in foregoing application to begin and end as therein requested and to be subject to all of the terms and conditions set forth therein as per Section 903.03 of the City of Chillicothe Revised Ordinances.

CITY OFFICIAL AUTHORIZATION SIGNATURE

DATE