



City of The Dalles
Community Development Dept
313 Court Street
The Dalles, OR 97058
(541) 296-5481, ext. 1125
www.thedalles.org

Application #: _____

Filing Fee: _____

Receipt #: _____

Deemed Complete: _____

Ready to Issue: _____

Date Issued: _____

Received: _____

Land Use Application

Building Permit

Demolition

Physical Constraints

Change of Use

Property Line

Minor Partition /

Adjustment

Fence

Adjustment

Tract Map

Applicant

Name: _____

Address: _____

Phone #: _____

Email: _____

Legal Owner (if different than Applicant)

Name: _____

Address: _____

Phone #: _____

Email: _____

Property Information

Address: _____

Map and Tax Lot: _____

Project Description:

Department Use Only

City Limits: Yes No Zone: _____ Overlay: _____ Airport Zone: Yes No

Geohazard Zone: _____ Flood Designation: _____

Historic Structure: Yes No Current Use: _____

Previous Planning Actions:

Erosion Control Issues? Access Issues? Utilities and Public Improvements? Items Needing Attention?

Ministerial

Administrative

Quasi-Judicial

Application Policy

I certify that I am the applicant or owner identified below. I acknowledge that the final approval by the City of The Dalles, if any, may result in restrictions, limitations, and construction obligations being imposed on this real property. I understand that if the property is owned in part or totality by a trust, partnership, corporation or LLC, I will be required to present legal documentation listing all persons that make-up the entity, as well as proof of my authorization to act on the entity's behalf. I consent and hereby authorize City representative(s) to enter upon my property for any purpose of examination or inspection related to this application. I certify that all information provided is true and correct, and consent to the filing of the application, authorized by my original signature below.

If the undersigned is different from the legal property owner, a notarized letter of authorization signed by the legal property owner must accompany this form.

Signature of Applicant

Signature of Property Owner

Date

Date

Additional Information

Department Comments

Conditions of Approval

Decision

Approved

Denied

Community Development Department

Public Works

Date

Date

Residential Building Permit Application

#: _____

New Single-Family	New Duplex	Manufactured Home	Accessory Dwelling Unit
Duplex Conversion	Remodel/Addition	Accessory Structure	

Brief Explanation:

Building Height: _____	Building Square Footage: _____
Accessory Building Height*: _____	Accessory Building Square Footage*: _____

**Primary building information required with all accessory development*

PLEASE INCLUDE THE FOLLOWING

A Site Plan. Must include: property boundaries, building location and setbacks, garage/carport/parking location and surface material, driveway location, known utility locations, landscaping detail, significant contours, and easements and floodplain information (if applicable).

Floor Plans. Must include room identification and dimensions, window/door location, balcony/deck locations.

Building Elevations. Must include building height, door/window locations, and dimensions. In addition, all dwellings must include six (6) or more of the following design standards in the overall building design. Each standard must be clearly shown on the building elevations. Check all that apply (minimum of 6):

- | | |
|--|--|
| 1. Attached garage or carport (1 per dwelling) | 6. Eaves, minimum 12” projection; front, rear, & sides |
| 2. Roof pitch 4/12 or greater | 7. Bay or bow windows |
| 3. Commercially available siding | 8. Exterior window sills; front, rear, & sides |
| 4. Covered porch entry | 9. Gable in addition to the primary roof pitch |
| 5. Recessed entry | 10. Other features subject to the approval of the Director |

Drainage Plan. Must demonstrate on-site stormwater collection and/or disposal, to eliminate the flow of stormwater onto sidewalks/trails, public rights-of-way and/or abutting private properties.

All other development approved through a development review process: a final site plan including construction and landscape detail addressing all conditions of approval.

Orientation: The front building line, which includes the front door, must be parallel to the street.

Signature of Applicant	Signature of Property Owner
_____	_____
Date	Date

APPLICATION FOR STRUCTURAL PERMIT

Building Codes Services
 2705 E 2nd Street
 The Dalles, OR 97058
 Phone: 541-506-2650 • Fax: 541-506-2651
 Email: buildingcodes@co.wasco.or.us • www.co.wasco.or.us

DEPARTMENT USE ONLY

Permit #: _____
 County: _____
 By: _____ Date: _____

This permit is issued under OAR 918-460-0030. Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.

CONSTRUCTION CATEGORY: <input type="checkbox"/> Residential <input type="checkbox"/> Government <input type="checkbox"/> Commercial		
JOB SITE INFORMATION		OWNER INFORMATION
Address:		<i>I am the property owner doing my own work (INT):</i> _____
City:		Name:
Directions to inspection site:		Mailing address:
		City/State/ZIP:
		Phone: _____ Mobile: _____
Is property inside city limits: <input type="checkbox"/> Yes <input type="checkbox"/> No		Email: _____
LOCAL GOVERNMENT APPROVALS		
Zoning	Flood Plain Review	Sanitation
Application #:	<input type="checkbox"/> Y <input type="checkbox"/> N	Information verified/approved? <input type="checkbox"/> Y <input type="checkbox"/> N
Information verified/approved? <input type="checkbox"/> Y <input type="checkbox"/> N	Signature:	Signature:
Signature:	Jurisdiction:	Jurisdiction:
Jurisdiction:		Date: _____ Tax lot#: _____
Date: _____ Tax lot#: _____		
VALUATION INFORMATION		
Job description:		
Occupancy:		
Construction type:		
Square feet:		
Cost per square feet:		
New/Alteration/Addition: <input type="checkbox"/> New <input type="checkbox"/> Alteration <input type="checkbox"/> Addition		
Is this a foundation ONLY permit? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is this a plan review ONLY? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Total valuation:		
Contractor name:		Building Fees
Mailing Address:		Permit fee
City/State/ZIP:		12% surcharge
Phone:		Plan Review
Email:		Plan review (permit fee x 0.65)
Contractor CCB license #:		Fire and Life Safety (permit fee x 0.40)
BCD license #:		Subtotal: (add up above fees)
<i>I hereby certify that, to my knowledge, the above information is true and correct. All work to be performed shall be in accordance with all governing laws and rules. I have read and do understand the attached "Information Notice to Property Owners About Construction Responsibilities."</i>		Miscellaneous Fees
		Seismic review (permit fee x 0.01)
		Re-inspection fee - \$78.00 each
		Investigation fee – actual cost
		GRAND TOTAL (fees and surcharges)

Applicant name:
Mailing Address:
City/State/ZIP:
Phone:
Email:
Signature: _____ Date: _____

PAYMENT OPTIONS
If paying by credit card, please provide best contact number below. _____ Payment can also be made online once permit is created. In most cases, a link to the ePermitting payment portal will be sent to the email on file. If you do not receive this link, please visit www.buildingpermits.oregon.gov and search for your address or permit number. Make check or money order payable to Wasco County. DO NOT SEND CASH.

STRUCTURAL PERMIT FEES – State Permit Fees Adopted for State of Oregon Jurisdictions

The 12% surcharge is not included in any of the fees below



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2705 E 2nd Street
The Dalles, OR 97058
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Email: buildingcodes@co.wasco.or.us ▪ www.co.wasco.or.us

TOTAL VALUATION	FEE
\$1.00 – \$2000.00	\$60.00
\$2001.00 – \$25,000.00	\$60.00 for the first \$2,000.00 plus \$9.40 for each additional \$1,000.00 or fraction thereof, to and including \$25,000.00
\$25,001.00 – \$50,000.00	\$276.20 for the first \$25,000.00 plus \$7.00 for each additional \$1,000.00 or fraction thereof, to and including \$50,000.00
\$50,001.00 – \$100,000.00	\$451.20 for the first \$50,000.00 plus \$4.70 for each additional \$1,000.00 or fraction thereof, to and including \$100,000.00
\$100,001.00 and up	\$686.20 for the first \$100,000.00 plus \$3.90 for each additional \$1,000.00 or fraction thereof.
OTHER INSPECTIONS AND FEES	
Residential Fire Sprinkler 13R (standalone/closed system) – <i>fee includes plan review (13D multipurpose/continuous loop requires Plumbing)</i>	
0 to 2000 sq. ft. area covered	\$98.00
2001 to 3600 sq. ft. area covered	\$103.50
3601 to 7200 sq. ft. area covered	\$139.75
7201 sq. ft. and greater	\$186.25
Prescriptive solar photovoltaic system – <i>fee includes plan review</i>	\$160.00
Non-Prescriptive solar photovoltaic system – <i>requires plan review</i>	Use Structural Permit Fee table above
Phased plan review - \$60.00 application fee plus 10% of the total project building permit fee not to exceed \$1500.00 for each phase (<i>is in addition to standard structural plan review</i>)	
Deferred plan review - 65% of the building permit fee calculated using the deferred portion valuation with a \$156.00 minimum (<i>is in addition to standard structural plan review</i>)	
Inspection outside of normal business hours (minimum charge 2 hours)	\$78.00 per hour
Re-inspection fee	\$78.00 per each
Inspections for which no fee is specifically indicated	\$78.00 per hour
Plan review fees	65% of structural permit fee
Fire and Life Safety plan review fees	40% of structural permit fee
Additional plan review required by changes, additions, or revisions to approve plans	\$65.00 per hour Residential \$78.00 per hour Commercial

For SI: 1 square foot = 0.0929 m²

RESIDENTIAL PLAN SUBMITTAL INTAKE CHECKLIST



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DEPARTMENT USE ONLY

Permit #: _____
County: _____
By: _____ Date: _____

PROJECT TYPE AND APPLICABLE CODE EDITION		
<input type="checkbox"/> New residence	<input type="checkbox"/> New, detached <i>accessory structure</i>	<input type="checkbox"/> Other:
<input type="checkbox"/> Alteration/addition to existing residence	<input type="checkbox"/> Alteration/Addition to existing detached <i>accessory structure</i>	
<input type="checkbox"/> Deck	<input type="checkbox"/> Repair	ORSC Edition:
MINIMAL SUBMITTAL REQUIREMENTS CHECKLIST FOR PLAN REVIEW		
	Provided	N/A
1.	<input type="checkbox"/>	<input type="checkbox"/>
Local Planning/Zoning, water district, erosion control, DEQ/septic/sewer approval.		
2.	<input type="checkbox"/>	<input type="checkbox"/>
Site/Plot Plan. (must be signed/stamped by approving jurisdiction) Show the size and location of new construction and existing structures on the site and distances from lot lines. Reference ORSC Section R106.2.		
3.	<input type="checkbox"/>	<input type="checkbox"/>
One complete set of Construction Documents. Construction documents must be of sufficient clarity to indicate the location, site specific design criteria per Table R301.2(1), nature and extent of the work proposed and show in detail conformity to the provisions of the code, relevant laws, ordinances, rules, and regulations. Reference ORSC Section R106.1.1.		
4.	<input type="checkbox"/>	<input type="checkbox"/>
Foundation Plan. Provide plan dimensions, footing sizes, posts, anchor bolts, hold-downs, associated details, including reinforcement requirements and foundation vent locations. Reference ORSC Chapter 4.		
5.	<input type="checkbox"/>	<input type="checkbox"/>
Floor Plans. (must be signed/stamped by approving jurisdiction) Provide dimensions, room identification, door size, window size, location of smoke and carbon monoxide alarms, water heater, furnace, ventilation fans, plumbing fixtures, and balconies and decks that are 30 inches above grade. Reference ORSC Chapter 5.		
6.	<input type="checkbox"/>	<input type="checkbox"/>
Cross sections and details. Show all framing members such as floor beams, headers, joists, sub-floor, wall construction, and roof construction. More than one cross section may be required to clearly portray construction. Show all wall and roof sheathing, roofing, roof slope, ceiling height, siding material, footings and foundation, stairs, fireplace construction, thermal insulation, etc. Reference ORSC Section R106.1.1.		
7.	<input type="checkbox"/>	<input type="checkbox"/>
Elevation Views. (must be signed/stamped by approving jurisdiction) Provide dimensions, including but not limited to, floor and roof eave and ridge elevations, opening locations, and finish grade profile. Reference ORSC Section R106.1.1.		
8.	<input type="checkbox"/>	<input type="checkbox"/>
Wall Bracing. Provide engineered or prescriptive lateral calculations and plans showing braced wall lines, bracing method, location and length of braced wall panels, and associated connections to roof, floor, and foundation. Lateral design details and connections shall be incorporated into the plans. Reference ORSC Sections R106.1.3, R602.10, R301.1.3. See https://www.oregon.gov/bcd/codes-stand/Pages/residential-structures.aspx for prescriptive wall bracing calculators.		
9.	<input type="checkbox"/>	<input type="checkbox"/>
Floor/Roof Framing Plans. Provide a plan for each roof and floor framing assembly that shows all structural framing members and supports, their sizes, spacing, species, grade, bearing locations, method of attachment (e.g. hardware), roof pitch, and attic ventilation requirements. Reference ORSC Chapter 5 and Chapter 8.		
10.	<input type="checkbox"/>	<input type="checkbox"/>
Design Calculations. Provide for all structural load carrying members that are not based on prescriptive span tables in the code. Reference ORSC Section R301.1.3.		
11.	<input type="checkbox"/>	<input type="checkbox"/>
Floor and/or Roof Trusses. Provide the design layout plan with truss details and calculations that have been stamped by an Oregon licensed engineer. Reference ORSC Sections R502.11 and R802.10.		
12.	<input type="checkbox"/>	<input type="checkbox"/>
Energy Code Compliance. Show compliance with Chapter 11 Energy Efficiency, identifying the additional Envelope Enhancement Measure and Conservation Measure chosen from Table N1101.1(2) (when applicable). Where Envelope Enhancement Measure No. 6 is chosen, provide supporting calculations (see https://www.oregon.gov/bcd/codes-stand/Pages/residential-structures.aspx for thermal performance calculator). Reference ORSC Chapter 11.		

Applicant: _____ Date: _____
Building Codes Services employee: _____ Date: _____

Physical Constraints Form

#: _____

INFORMATION REQUIRED *(Check the following boxes that apply to this permit)*

Total Cut and/or Fill Amount *(must show calculations on reverse side of paper)*: _____

All cuts and/or fills greater than 250 cubic yards must provide engineered plans

- ☐ Cuts and/or fills greater than 50 cubic yards
- ☐ Cuts and/or fills greater than 250 cubic yards (must be engineered)
- ☐ Geohazard Zones 1 or 4
- ☐ Property Slopes greater than 25%, or greater than 20% where utility extensions are required
- ☐ 100 year flood plain boundary
- ☐ Natural Drainage Way(s) (identified)
- ☐ Army Corps of Engineers flowage easement
- ☐ Erosive lands, vegetation removal, disturbed top soil at slope of 50% (2:1) or more
- ☐ Ground water table less than 10 feet below grade
- ☐ Development greater than one acre (require DEQ Construction Stormwater Permit 1200-C)b

EROSION CONTROL

No material shall leave the site due to erosion caused by wind or rain.

No material from the site shall be tracked on to a public right-of-way.

Signature of Applicant

Signature of Property Owner

Date

Date

Department Use Only:

Comments/Conditions:

Community Development Department

Public Works

Date

Date

Physical Constraints Form

#: _____

SHOW CUT/FILL CALCULATIONS BELOW or include as an attachment



City of The Dalles
Department of Public Works
1215 West 1st Street
The Dalles, OR 97058

CITY OF THE DALLES PHYSICAL CONSTRAINTS PERMIT EROSION CONTROL NOTES

The following are general erosion control measures that shall be followed with a physical constraints permit.

1. The applicant shall take effective action to prevent the escape of sediment from the site by installation of erosion and sediment control measures and practices prior to and concurrent with land disturbing activities. The applicant shall prevent the formation of any airborne dust nuisance and shall be responsible for any damage resulting from failure to do so.
2. Erosion and sediment control measures shall be maintained at all times. If full implementation of the approved plan does not provide for effective erosion control, additional erosion and sediment control measures shall be implemented by the applicant to control or treat the sediment source.
3. The contractor shall implement the following dust, erosion and sediment control practices:

A. Prior to construction

- 1) Install erosion and sediment control measures prior to beginning work on site. Items such as sediment fence, inlet protection and other best management practices (BMPs) shall be in place before work on site begins.
- 2) The applicant shall install construction entrances at the beginning of the project and these entrances shall be maintained for the duration of the project.

B. During construction

- 1) Areas of earth exposed by clearing, earthmoving, or excavation shall be minimized at all times.
- 2) Material excavated or graded shall be sufficiently watered or treated with an approved dust control additive to prevent dust erosion.
- 3) During grading, trenching and construction, streets and alleys next to work area shall be swept at least once a day, and as required by the city to remove silt and other debris which may have accumulated from construction activities. Failure to manage sediments on site may require additional measures to be taken to manage the sediment.
- 4) Inspect and maintain erosion and sediment control measures for the duration of the project to prevent any accumulation of sediments from leaving the site. Any accumulation of sediment off site or within the storm water system as a result of the project will require the applicant to clean the affected area and/or storm water structures. Cleaning of the storm water structures shall be done in a manner as to not flush the sediments into a downstream system.
- 5) Any disturbed area left exposed for a period greater than 14 days shall be stabilized with mulch or seeding unless site conditions or weather warrant soil stabilization installation of the soil stabilization to occur sooner.

C. After construction

- 1) When areas of existing vegetation are disturbed from excavation or storage, the applicant shall adequately seed the disturbed area to protect the area from erosion. If the area isn't or cannot be adequately seeded then the area shall be covered by a protective material such as straw or mulch to prevent erosion.
 - 2) Remove work area temporary erosion and sediment control measures. Remove any accumulated sediments from these BMPs and adjacent streets and alleys.
4. The applicant shall have an action plan and keep the necessary materials on site for the capture and disposal of any petroleum product leaks or spills associated with servicing, refueling or operation of any equipment utilized on the project.
5. The applicant shall provide a concrete washout area on site to prevent concrete wash water from entering the storm water system or waterbody. Washout area should not be located in an area where shallow groundwater may be present, such as near natural drainages, springs, or wetlands.

The following are erosion control Best Management Practices that shall be incorporated into the project. If cut and/or fill is over 250 cubic yards, erosion control plan shall be submitted by an engineer. If the project disturbs more than one acre of land a 1200-C Construction Stormwater Permit is required by DEQ.

Construction Entrance – See City Standard Drawing RD1000

Sediment Fence – See City Standard Drawing RD1040

Inlet Protection – See City Standard Drawings RD1010 and RD1015

Sediment Barrier – See City Standard Drawings RD1030 thru RD1033

Other:



\$20.00 FEE (In advance)

CURB/SIDEWALK/DRIVE APPROACH PERMIT

****This permit is void if the work is not completed within 60 days****

Please complete the entire form

Applicant Name: _____ Phone: _____

Site Address: _____ or,

Township _____ N, Range _____ E, Section _____, Tax Lot # _____ The Dalles, Oregon.

I hereby apply for a permit to construct a: ☐ Curb ☐ Sidewalk ☐ Drive Approach ☐ Curb Ramp

Type _____

I am:

- ☐ The Property Owner doing my own work (For Curb and Sidewalk in-fill only).
- ☐ A Licensed Contractor. Construction Contractor Board (CCB) # _____ Expires _____
- ☐ The Property Owner hiring a Licensed Contractor. CCB # _____ Expires _____

Applicant must provide a sketch of the property with cross streets and location of proposed improvement area with dimensions of improvements and setbacks from property lines.

For non-infill Curb and Sidewalk construction and all Curb Ramp construction, permittee shall have plans prepared by a licensed Oregon Professional Engineer (P.E.) and submit them to the Engineering Division at Public Works for review and approval before installation of concrete improvements.

Grades shall be field staked for construction by permittee using a qualified engineer/surveyor in locations without existing curb and/or sidewalk.

- ☐ Infill Curb and Sidewalk: Using grade line established by existing curb and/or sidewalk.
- ☐ Altering Existing Sidewalk/Curb Grade: Submit Engineered Plans for review and/or approval
- ☐ No Existing Curb or Sidewalk: Submit Engineered Plans for review and/or approval to establish grade
- ☐ Curb Ramp: Design Engineer to obtain ADA Curb Ramp Checklist from Engineering Division at Public Works by emailing mbosse@ci.the-dalles.or.us. Submit Engineered Plans for review and/or approval to establish grade

GENERAL REQUIREMENTS:

- Standard curb must be formed the entire face depth which requires saw cutting, removing and replacing the asphalt. Asphalt replaced should be a minimum of 2" wider than the approved compaction device. Curb and gutter is required at curb ramps.
- Bottom of curb cut (end of wings/throat) must be a minimum of 5' from property line.
- Minimum of 2" of ¾-minus compacted aggregate (watered)
- Contact Construction Inspector 48 hours in advance of pouring to schedule a Pre-Pour Conference. Contact: City Inspector (541) 288-6386
- No monolithic pours are allowed without prior approval from City Engineer or their designee
- All curbing and sidewalks installed in the Right-of-Way shall be free of cracks or damage. If cracking or damage occurs concrete will be replaced at contractor/property owner's expense.
- A Sidewalk/Street Closure Permit is required for all work on existing sidewalks/pedestrian routes. This permit is available at City Public Works and must be submitted 5 days prior to work.
- Other Requirements: _____

ACKNOWLEDGEMENT OF APPLICANT RESPONSIBILITY

I will construct a Curb/Sidewalk/Drive Approach/Curb Ramp according to the latest edition of The Dalles Standard Specifications and Drawings, of which I acknowledge receipt. (The latest edition of Section 00759 of the City of The Dalles Standard Specifications and appropriate Standard Drawings will be provided with the permit). I also understand that all constructed improvements not meeting the specified dimensions and slopes, when inspected by City Inspector after construction, shall be removed and reconstructed at no cost to the City.

Applicant

Signature _____ Date _____

Owner Signature (if different than applicant): _____ Date: _____

Print Name: _____

FOR PLANNING DEPARTMENT USE ONLY

Zone District/Overlay _____	Street Classification _____	Posted Speed _____
Right of Way Planner Approval _____		Date: _____

FOR PUBLIC WORKS USE ONLY

ADA Coordinator Approval _____	Date: _____
ADA File # _____	



CITY of THE DALLES PUBLIC WORKS

1215 WEST FIRST STREET
THE DALLES, OREGON 97058
(541) 296-5401

SIDEWALK/STREET CLOSURE PERMIT

This application must be submitted at least five (5) business days prior to the proposed sidewalk/street closure date. Applications may be submitted in person or mailed to the Public Works office at the address above or emailed to Jcorbin@ci.the-dalles.or.us. Applicant agrees to comply with the provisions of the Charter, Ordinances (2.24.060), Resolutions, and Policies of the City of The Dalles pertaining to such closures; and with the instructions and requirements as listed below.

Please complete the entire form

Applicant Name: _____ Date: _____
Address: _____ Phone: _____
Contact/Responsible Person _____ Phone: _____
Email Address: _____ Cell: _____

TYPE OF CLOSURE (Check at least 1)

- | | |
|---|---|
| <input type="checkbox"/> Street for Construction Work | <input type="checkbox"/> Sidewalk for Construction Work |
| <input type="checkbox"/> Street/Parking Lot for Event | <input type="checkbox"/> Sidewalk for Event |
| <input type="checkbox"/> Parking Lane for Dumpster | <input type="checkbox"/> Other |

CLOSURE FROM _____ (Date/Time) TO _____ (Date/Time)

LOCATION/ADDRESS OF CLOSURE _____

REASON FOR CLOSURE _____

INSTRUCTIONS/REQUIREMENTS:

- Applicant **must** provide a Traffic Control Plan (TCP) for approval for all Street and Parking Lot Closures. Traffic Control Plan should show proposed detour routes, signs, barricades, and traffic control devices.
- Applicant **must** provide a Temporary Pedestrian Accessible Route Plan (TPARP) for approval for all Sidewalk Closures. TPARP should show proposed accessible pedestrian detours, signs, barricades, and pedestrian delineation devices. (See Standard Drawing TM844 for general TPARP examples)
- Applicant **must** notify Central Dispatch at the time of street closing and reopening. (541-298-5507)
- Applicant **must** notify adjacent property/business owners prior to closure.
- Applicant **must** provide proof of liability insurance with The City of The Dalles listed as co-insured if City Street/Parking Lot closure is for an event

THIS PERMIT WILL BE CONSIDERED A PUBLIC DOCUMENT. ALL INFORMATION SUBMITTED WILL BE ACCESSIBLE TO THE PUBLIC, IN ITS ENTIRETY, ON THE CITY'S WEBSITE.

ACKNOWLEDGEMENT OF APPLICANT RESPONSIBILITY

The undersigned agrees to defend, indemnify and hold the City of The Dalles, its officers, agents and employees, harmless from and against all claims, liabilities, demands, damages and actions, of whatever form or nature, including but not limited to property damage, pedestrian accessibility, personal injury and death, together with costs and attorney fees incurred in defense thereof, arising from or relating in any way to the street or sidewalk closure authorized by this permit and the undersigned's activities in connection with this permit. Applicant for City Street or Parking Lot closures for events must provide a Certificate of General Liability Insurance with a minimum of \$1,000,000 coverage, with stated purpose of on the Certificate for the event and listing The City of The Dalles as a co-insured. Insurance is in addition to acknowledgement of responsibility and cannot be cancelled without prior notice to the City. In addition the Responsible Person listed on this permit shall remain on-site during the duration of the event and closure.

Failure of the applicant to meet the requirements of this permit, including following of the Traffic Control Plan and/or Temporary Pedestrian Accessible Route Plan, will result in a Stop Work Order and possible revocation of the permit.

I understand and agree to the terms of this Sidewalk/Street Closure Permit.

Applicant Signature _____ Date _____

CITY USE ONLY

☐☐

Receipt of Required Items

TCP for Street/Parking Lot Closure	<input type="checkbox"/> Attached	<input type="checkbox"/> Not Required
TPARP for Sidewalk Closure	<input type="checkbox"/> Attached	<input type="checkbox"/> Not Required
Certificate of General Liability	<input type="checkbox"/> Attached	<input type="checkbox"/> Not Required

RELATED PERMITS _____

ROUTING ORDER – PLEASE EXPEDITE

Department	Approval	Date
Public Works – Transportation		
Public Works – ADA Coordinator		
Police Department		
Human Resources - Risk Manager		
City Manager		

THIS PERMIT IS:

- ☐ **APPROVED** AND EXPIRES ON _____
- ☐ **APPROVED** WITH REVISIONS AND EXPIRES ON _____
- ☐ **DENIED** FOR FOLLOWING REASON: _____

Authorized by: _____ Title: _____

Public Works to Notify Applicant of final decision