



City of Hughson
7018 Pine Street/PO Box 9
Hughson Ca. 95326
209-883-4054

STREET CLOSURE PERMIT APPLICATION PROCEDURE FOR PURPOSES OTHER THAN CONSTRUCTION- RELATED ACTIVITIES

1. Please complete Items 1-3 on page 2 of this packet, sign, and date the form.
2. Have Page 3 of the Street Closure Permit Application signed by all residents affected on the block of the street closure.
3. Return Pages 2 and 3 of the completed packet to City Hall, 7018 Pine Street. The fully completed application and fee (\$207.00) must be submitted 15 days prior to your event/activity to allow for further processing. You are required to submit proof of Special Event Insurance, naming the City of Hughson as "Additional Insured" in the amount of \$1,000,000. ***If your event/activity requires a Special Event Application, both fully completed applications and fee (\$207.00) must be submitted 30 days prior to your event/activity.**
4. A staff member will contact you regarding questions related to your event.
5. The Public Works Department will review your request and provide you with a traffic control plan specific to your event.
6. The applicant will be responsible for acquiring, installing, and maintaining the signs, barricades and traffic control devices specified in the traffic control plan. Vendors familiar with providing the items needed for a street closure are:

Safe T Lite
1051 N Emerald Ave
Modesto ● Ph. 522-8913

United Rentals
5719 McHenry Ave
Modesto ● Ph.572-7470

The vendor names are provided for your convenience. The City of Hughson does not endorse or promote the use of these vendors. You may use any vendor who can supply the items as specified in the current edition of the Manual on Uniform Traffic Control Devices. www.dot.ca.gov/hq/traffops/signtech/mutcdsupp

7. The Street Closure Permit Application will be routed to the Police and Fire Departments for Comments and Approval. Once comments are received from the Police and Fire Department, you will be notified of any problems or will receive an approved permit from the Public Works Department.
8. Please review the attached Applicant's Checklist for completion. Should you have any questions regarding the application procedure, please contact the City of Hughson at 209-883-4054.



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FOR PURPOSES OTHER THAN CONSTRUCTION- RELATED ACTIVITIES

1. **EVENT/ACTIVITY:** _____
EVENT/ACTIVITY DATE(S): _____ **TOTAL DATES FOR CLOSURE:** _____
START TIME(S): _____ **FINISH TIME(S):** _____

STREET(S) TO BE CLOSED: _____

MAP INDICATING THE LOCATION OF THE EVENT/ACTIVITY IS REQUIRED WITH THIS APPLICATION

IS THIS EVENT/ACTIVITY OPEN TO THE PUBLIC? YES NO

WILL THIS EVENT/ACTIVITY INCLUDE ENTERTAINMENT? YES NO

WILL THERE BE ALCOHOL AT THIS EVENT/ACTIVITY? YES NO

If you answered "Yes" to any of the above, please complete the attached Special Event Application.

2. **SPONSORING ORGANIZATION:** _____
LOCAL ADDRESS: _____
CITY/STATE/ZIP: _____ **PHONE:** _____

3. **RESPONSIBLE INDIVIDUAL, IF OTHER THAN ABOVE:** _____
ADDRESS: _____
CITY/STATE/ZIP: _____ **PHONE:** _____

The applicant will be responsible for providing, maintaining, and installing traffic control devices necessary for the street closure according to the approved *traffic control plan*. During the hours of darkness, sufficient warning lights or flares shall be maintained at suitable distances to warn the approaching traffic. The applicant hereby agrees to defend, indemnify, and forever holds the City of Hughson, its Officials, Employees, Volunteers or Agents harmless against each and every claim, demand or cause of action that may be made or come against it by reason of or in any way arriving out of the closing or blocking of the right-of-way approved under this permit.

Applicant Signature: _____ **Date:** _____

Fire Department Comments: _____

Signature: _____ Date: _____

Police Department Comments: _____

Signature: _____ Date: _____

Approved by Public Works Department:

Signature: _____ Date: _____



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STREET CLOSURE PERMIT APPLICATION
CONCURRENCE BY AFFECTED PROPERTY OWNERS
ON THE STREET SEGMENT(S) BEING CLOSED

I am aware of the (proposed event/activity) _____,
planned for (dates) _____, and have no objection to the
proposed closure of (event/activity location) _____.

Printed Name

Address

Signature

_____	_____	_____
_____	_____	_____
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_____	_____	_____



CITY OF HUGHSON

Community Development Department, Building Division

7018 Pine Street • Hughson, California 95326 • Office 209.883.4054 • Fax 209.883.2638

SPECIAL EVENT APPLICATION

Applicant/Organization Information

Applicant Name: _____ Phone: _____
 Name of Business / Organization: _____ Phone: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Event Information

Event Name: _____ Event Hours: _____
 Description of Event: _____

Fundraiser: Yes No Event Purpose: _____

Event Date: _____ Event Hours: _____

Event Location: _____ Estimated Attendees: _____

Street Closure: Yes No If YES, Please Complete Street Closure Permit Application

Age Group(s) (Youth, Adult, Family, etc): _____

Alcohol at Event: Yes No If Yes: Served Sold Guest bringing Alcohol

Food Vendors: Yes No Liquor License Number: _____

Product Vendors: Yes No

If Yes, Product/Food Description: _____

Will your Event include: Live Music Amplified Music DJ Music Genre: _____

Check all included items:

- | | |
|---|---|
| <input type="checkbox"/> Vendors and Booths | <input type="checkbox"/> Electrical Generators |
| <input type="checkbox"/> Extra Parking | <input type="checkbox"/> Comfort Stations (water and first aid) |
| <input type="checkbox"/> Sound System | <input type="checkbox"/> Portable toilets |
| <input type="checkbox"/> Electrical Power Service | <input type="checkbox"/> Other: _____ |

Set-up Hours: _____

Clean-up Hours: _____

The following must be submitted with application:

- A. Map indicating location of activity.
- B. Flyers describing the event. (If applicable)
- C. Insurance Coverage Documentation
- D. If private property is to be used for the event, applicant will provide written authorization from the property owner.

By submitting this Application, the Applicant understands that the City shall review the application under the procedures set forth in the Hughson Municipal Code. If the City approves the application, the Applicant will be notified by the City.

Applicant Signature

Date