CITY OF ROCKLIN



APPLICATION FOR TEMPORARY RESIDENTIAL STREET CLOSURE PERMIT

Chapter 12.24 of the Rocklin Municipal Code regulates the closing of any street within the City of Rocklin for the purpose of holding a celebration such as a block party or street dance. To close any portion of a public street or alley to vehicular or pedestrian traffic, a permit must be completed. The application for the permit must be filed 20 days prior to the scheduled temporary closure. The Director of Public Services will respond to the application within seven (7) days of its receipt. An applicant for a permit to temporarily close a public roadway must agree to the following conditions:

- 1. All debris and trash must be removed from the streets immediately after the activity or event.
- 2. A petition requesting approval of the event must be presented to and signed by all residents on the street who will be affected by the street closure. *The petition with signatures of all affected residents must be attached to the application at the time of filing.*
- 3. All streets shall be maintained accessible to all emergency equipment at all times. Only readily removable barricades which meet safety specifications shall be used to close the streets. A plan for barricade placement and type must be submitted for approval. Barricades may be obtained from the Public Services Department.
- 4. All tables, chairs, structures or other large items are restricted to one side of road and the sidewalk area.
- 5. Sponsors shall restrict participation in any event conducted pursuant to this permit to neighborhood residents and friends.
- 6. There shall be no selling of food, beverages or merchandise either for profit or non-profit.
- 7. Any disturbance or annoyance of residents within the immediate vicinity will be cause for the Police Department to take appropriate law enforcement action.
- 8. This permit authorizes only the erection of barricades for the purpose of closing the street(s) indicated. This permit does not authorize any activity otherwise prohibited by law and shall not constitute any exception or excuse for violation of any law, ordinance or regulation. The Police Department may revoke this permit at any time.

- 9.. The applicant(s) shall assume and reimburse the City for any and all costs and expenses determined by the Director of Public Services to be unusual or extraordinary and related to the closing of the street for which the permit is sought, including but not limited to:
 - a. The cost of damaged or missing barricades and/or signs.
 - b. The cost of providing and moving garbage or waste receptacles.
 - c. The cost of City personnel who are required by the city to work overtime hours or other than a regular shift or to perform duties as a result of such temporary street closure.

I have read and will abide with the above provisions.

Date

Signature

CITY OF ROCKLIN



APPLICATION FOR TEMPORARY RESIDENTIAL STREET CLOSURE

| Name of street(s) to be closed: | | | and | | |
|---------------------------------|------|--------------------------------------|------|---------|-------|
| Between: | | and (Street) | | | |
| Date of Closure: | | Requested Time of Closure: to | | | |
| Type of Closure: | | Complete | | Partial | |
| Explain: | | | | | |
| Applicant(s): | Name | Address | City | Zip | Phone |
| | Name | Address | City | Zip | Phone |
| | Name | Address | City | Zip | Phone |

If more space is needed to list additional applicants, attach a separate sheet of paper. If applicant is an organization, write in the organization and business address above. List the coordinator, president and any other persons who will be coordinating events or are involved in the street closure request below:

| Office Held (1) | Name | Residence Address | City | Zip | Phone |
|-----------------|--------------|------------------------------|------|-----|-------|
| Office Held (2) | Name | Residence Address | City | Zip | Phone |
| Purpose of C | losure: | | | | |
| Estimated Nu | umber of Pe | rsons Participating in Event | : | | |
| Parking Rest | rictions Req | uested (specify): | | | |

| Sound Equipment to be Used: | Yes | No | |
|---|---|---|-----|
| If yes, describe: | | | |
| Attachments: | Neighborhood I Barricade Plan Certificate of In | | |
| Approved | Denied | Approved with Condition | ons |
| Conditions: | | | |
| | | | |
| Date: | CITY | OF ROCKLIN | |
| | By: Ju: | stin Nartker, Director of Public Services | |
| | FOR INTERNAL USE | E ONLY | |
| cc: Chief of Police City Attorney Fire Chief | | Date Received: | |
| Director of Administrative Servi City Engineer Public Services Public Transportation Authority | ces | Response Deadline: | |
| Post Office Solid Waste Contractor Applicant Other: | | | |



CITY OF ROCKLIN

TEMPORARY RESIDENTIAL STREET CLOSURE RESIDENT PERMISSION FORM

As a resident of the City of Rocklin, I affirm that I have read the City of Rocklin's Application for Temporary Residential Street Closure Permit information and agree to all the conditions relating to street closure in my neighborhood on _ (date) (day)

during the hours of ______ to ______ (start to ending time of closure)

| RESIDENT NAME | ADDRESS | TELEPHONE | INITIALS |
|----------------------|---------|-----------|----------|
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