

TOWN OF PICTOU STREET CLOSURE APPLICATION

APPLICATION INSTRUCTIONS

Applications are to be made on the following form and submitted to the Town Office for processing. Applications must be filed, at a minimum, three (3) weeks in advance of the proposed event date. Events cannot occur without an approval being issued by the Town of Pictou. Applications require approval of both Town Administration and the Local Traffic Authority.

Do Not Write In This Space	FFICE USE ONLY	
Event:	Regional Traffic Supv/RCM	Ρ
Date:	Supt. Of Public Works	
Area:	Fire Chief	
Approved Yes No	EHS (if applicable)	
Town Staff Completing this application:		
Applicant/Organization Name		
Contact Person	Phone No	
Mailing Address	Email	
	Additional Contact Info.	
	Daytime Phone No.	
	Cell Phone No.	
REQUESTED STREET CLOSURE(S) BY NAME/DATE:		
NAME	<u>DATE</u>	TIME
Describe the planned event/activities in detail:		
Describe the planned event/activities in detail.		
The undersigned hereby agrees to hold harmless and indemnify the Town of Pictou for any and all liability for any property damage, loss or personal injury to any third party resulting from the event.		
Applicant's Signature	Date	

Terms and Conditions prescribed by the Town of Pictou:
Terms and Conditions prescribed by the Local Traffic Authority:
TOWN OF PICTOU (do not write in this space) Approved □ Denied □
Approved subject to the conditions set forth on the reverse of this form. □
Tipped to die continue out to the continue of
Chief Administrative Officer (or designate) Date
Town of Pictou
RCMP/LOCAL TRAFFIC AUTHORITY (do not write in this space) Approved □ Denied □
Approved subject to the conditions set forth on the reverse of this form. \Box
Local Traffic Authority Date Town of Pictou