

**Town of Friday Harbor**

PO Box 219 / Friday Harbor / WA / 98250

(360) 378-2810 / fax (360) 378-5339 / www.fridayharbor.org

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**Street Closure Application**

Application date:	Tax parcel number:	Permit # <hr/>
		Office Use Only
Applicant / Franchise Holder:		Property owner phone number:
Mailing address:  		
Name of Contractor:		WA State Contractor's Registration #:
Location / description of project (must include street address):  		
Date of Closure:	Time(s) of Closure:	
Reason for Closure:    		
<b>Procedure</b>		
1. Applicant shall submit a drawing indicating the streets to be closed. Said drawing shall indicate the placement of type of traffic control signs to be installed.		
2. Signing, barricades, and traffic control in the vicinity of the work shall conform to provisions of the "Manual on Uniform Traffic Control Devices for Streets and Highways" and the "Manual for Emergency Traffic Control for Protection of Men & Equipment".		
3. The applicant shall pay to the Town all costs of, and expenses incurred in the examination, inspection, and supervision of such work on account of the granting of said permits.		
<b>Applicant to attach copy of insurance naming Town as "Additional Insured".</b>		
<b>I, the undersigned have read, understand, and agree to follow all instructions, procedures, and conditions stated herein.</b>		
Signature of Applicant: _____		

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**Street Closure Checklist**

It will be the applicant's responsibility to notify all impacted parties 24 hours prior to any street closure. The following agencies will be notified as a minimum:

Town of Friday Harbor Public Works  
San Juan County Sheriff's Office  
San Juan Island School District #149  
United States Post Office

Friday Harbor Fire Department  
San Juan Island Fire District #3  
San Juan County Public Works

I CERTIFY THAT I WILL CONTACT THE ENTITIES LISTED ABOVE:

Signature of Applicant: \_\_\_\_\_

Date:

**Town of Friday Harbor Use Only**

Applicant is permitted for street closure of the Town right of way as specified herein.

Approved by: \_\_\_\_\_  
Town Administrator

Date:

Indemnity Agreement completed by Applicant	Attached	Not Needed
Utilities Superintendent notified	Date	Initials
Street Department notified	Date	Initials
Town Marshal notified	Date	Initials
SJC Fire District #3 notified	Date	Initials
Sheriff Department notified	Date	Initials
Ferry Terminal Agent notified	Date	Initials

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**INDEMNIFICATION AGREEMENT**

I, \_\_\_\_\_ specifically and expressly agree to defend, indemnify, and hold harmless the TOWN OF FRIDAY HARBOR and all its officers, officials, employees, and agents from and against any claim, damage, liability, cost, penalties, attorney fees, etc. of whatsoever kind on account of death or injury of any or all persons involved and/or on account of all property damage of any kind whether tangible, intangible, or loss of use resulting therefrom, to any party arising from or in any matter connected with the EVENT taking place on publicly owned property, by an act or omission or negligence of the TOWN OF FRIDAY HARBOR or any of its officers, officials, employees, or agents except to the extent prohibited by law.

I, \_\_\_\_\_ specifically and expressly waive any immunity granted under the Washington Industrial Insurance Act, Title 51, RCW, or similar laws or other jurisdictions, and by signature below acknowledge that this waiver was mutually negotiated and agreed to by these parties. In the event of litigation between the parties to enforce the rights under this indemnity provision, reasonable attorney's fees shall be allowed to the prevailing party.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
date

\_\_\_\_\_  
TOWN OF FRIDAY HARBOR

\_\_\_\_\_  
date