

Yellow Medicine County Highway Department
1320 13th Street
Granite Falls, MN 56241-1286
Phone: (320) 313-3000

APPLICATION FOR BARRICADING COUNTY ROAD PERMIT

County Highway _____ from _____ to _____

Note: Attach a route map if more than one County Highway will be used.

Roadway will be obstructed on date: _____ start time: _____ ending time: _____

The applicant is requesting to temporarily occupy a portion of the roadway for the following reason: _____

Name of Organization: _____

Representative of Organization: _____

Address: _____

Telephone: _____ Email: _____

This permit does not in any way relieve the applicant of liability for damages caused to the road, or resulting from traffic accidents that may in any way be related to the permit. All damages, claims, or adjustments shall be the responsibility of the party requesting and signing the permit. It is understood that the County Highway is to be restored to its original condition.

The applicant agrees to indemnify, hold harmless, and defend the County of Yellow Medicine and the State of Minnesota, its officials, agents, servants, and employees from payment of any sum or sums of money to any persons whomsoever, for all attorney fees, costs of investigation, and of defense, claims, actions, or suits growing out of injuries, including death, to persons or property damage caused by the applicant and/or applicant's employees act of barricading of above referenced county highway.

It is further the intent of this agreement to hold the applicant responsible for the payment of any and all claims, suits, or liens due to any negligent act, error, or omission by the applicant and/or applicant's employees which may be in any way attributable to or asserted against the County of Yellow Medicine and the State of Minnesota and/or its officials, agents, servants, or employees as applicant and/or applicant's employees' act of barricading the roadway. In addition to holding the County and State harmless, the applicant will defend the County and State, its officials, agents, servants, and/or employees, with counsel reasonably acceptable to the County and will pay the costs of that defense of any legal action brought, due to acts or actions of the applicant and/or applicant's employees.

The applicant also agrees to provide general liability and property insurance in accordance with the following provisions: (A) The insurance shall be a standard general liability policy and shall be filed in the County Highway Department office. (B) The County shall be named as an additional insured. (C) Unless otherwise provided in writing, signed by the County, the limits of liability shall be as follows:

<u>Coverage</u>	<u>Limits of Liability</u>
<i>Bodily Injury Liability</i>	<i>\$1,500,000.00 each occurrence</i>
<i>Property Damage Liability</i>	<i>\$1,500,000.00 each occurrence</i>
<i>Physical Damage to Property</i>	<i>\$1,500,000.00 each occurrence</i>

(D) The insurance shall be in full force and effect before any road closure is performed on the County highway. (E) The applicant shall not cancel the insurance until the road closure for which it is required has been completed, and the County Highway has been reopened. The insurer shall provide notice to the County Highway Department prior to any termination. (F) A Certificate of Insurance shall be delivered to the County Highway Department at least 7 days in advance of the date of the road closure for which the insurance is required. (G) Instructions shall be given by the County Highway Department to the applicant on correct installation of barricades as outlined in the Mn/DOT Temporary Traffic Control Zone Layouts Field Manual. (H) In case of an accident, the applicant agrees to contact the Yellow Medicine County Highway Department and assist in the completion of an accident investigation report.

Date

Applicant's Signature

Please print applicant name

APPROVAL BY YELLOW MEDICINE COUNTY ENGINEER

Approval is hereby given to _____

to barricade County Highway No. _____ as indicated above.

Date _____

Yellow Medicine County Engineer