



1 Toronto Street  
Colborne, Ontario  
K0K 1S0  
Phone: (905) 355-2821  
Fax: (905) 355-3430

Permit No.: \_\_\_\_\_  
Issued By: \_\_\_\_\_  
Date: \_\_\_\_\_  
Time: \_\_\_\_\_

## Special Events Permit

Permit applications are to be submitted via email to [roads@cramahe.ca](mailto:roads@cramahe.ca) **at least ten (10) business days prior to the Event.**

### Please Print

Name of Event: \_\_\_\_\_ Organization: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Position: \_\_\_\_\_

Applicant's Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

### Type of Special Event

Parade  Bicycle Event  Walk-A-Thon  Procession

Street Festivities  Running Event  Sidewalk Sale  Filming

Other (specify) \_\_\_\_\_

Planned Route: \_\_\_\_\_

Township of Cramahe Roads: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Number of Participants: \_\_\_\_\_

Start Time: \_\_\_\_\_ AM / PM Finish Time: \_\_\_\_\_ AM / PM



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### Event Contacts

Municipal: \_\_\_\_\_

Phone: \_\_\_\_\_

Police Representative: \_\_\_\_\_

Detachment: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### Event Requirements

- Road Closure  Yes  No
- Certificate of Public Liability Insurance Attached  Yes  
(naming the Township of Cramahe as an additional insured)
- Traffic Control / Signage provided by: \_\_\_\_\_ Detour provided by: \_\_\_\_\_

### **I/We hereby agree to the following conditions:**

- To indemnify and save harmless the Corporation of the Township of Cramahe and the area County from any and all claims and/or damages arising out of this road closing and to provide any bond or insurance which may be required in this regard.
- To be responsible for any and all costs to provide and maintain sufficient traffic control measures to ensure safety for the traveling public and participants.

\_\_\_\_\_  
**Date of Application**

\_\_\_\_\_  
**Signature of Applicant**

### **Office Use Only**

Road Closing By-law Required  Yes  No Date Submitted: \_\_\_\_\_

Township Approval: \_\_\_\_\_ Date of Approval: \_\_\_\_\_