City of Germantown, Ohio 1 North Plum Street Germantown, OH 45327 (937) 855-7255 telephone



REQUEST FOR DOWNTOWN ALLEY/STREET **TEMPORARY CLOSURE**

This request form must be submitted to the City of Germantown at least 14 days prior to closing the alley for a short term closure, at least 60 days prior for seasonal closure.

Today's Date:	1-2 day closure	Seasonal Closure _	Other (specify)	
Applicant:				
Name	Address	Phone #	Email	
Proposed Date of Closure(s):	Time(s)	of closing From:	a.m./p.m. To:	a.m./p.m.
Location of Alley(s) to be close	ed:			
(Attach a copy of the map sho	owing proposed closures, anticipat	ted barriers/cones/sign	s needed and where to be	e erected.)
Purpose of the Closing/Event	Name:			
Description of Activities:				
Anticipated # of attendees:	Anticipated #	of participating busines	sses :	
Names of participating busine	esses/organizations:			
Is this a first time event? Y/N	If No, when was this eve	nt last held?		
 Please describe any record used as part of the event 	rded equipment, sound amplificat :	ion equipment, live or r	ecorded music and hours	of music to be
Describe how trash and be	pathroom facilities will be handled			
	s responsible for maintaining the odition at the end of closure.	closure area during the	term of the closure. The a	are must be re-
 Any construction affectin 	g paved area, including barriers, fo	encing, lighting, and sig	nage must be approved b	y the City.

- Applicant is required to notify property owners/tenants/businesses within 200' (and others affected by the closure) of the requested closure. Please use attached form.
- Will the DORA be used in conjunction with this event? Yes/No
- Are you planning to use food trucks? Yes/No

If yes, submit map of where you seek to locate the food truck(s), and submit completed Mobile Food Vendor Application form. (Available at https://germantown.oh.us/form-docs)

The responsible individual or organization shall provide proof of \$1,000,000 in liability insurance per occurrence for the protection of the City of Germantown, OH indemnifying and saving harmless the City from any and all liability that may arise or accrue by reason of the use of the said alley. City must be shown as Certificate Holder.

Request for Downtown Alley/Street Temporary Closure, page two

Barricades and signs may be provided by the City of Germantown Public Service Department for closure of 1-2 days only.
 After approval of the closure, the applicant is responsible for coordinating barricades and signs with the Public Service Department at (937) 660-0579.

By my signature below, I have contacted all residents/business who may be affected by the closure. Names and addresses are attached, and reflect their approval of the proposed closure, any non-approving entities will be listed along with proposed solutions offered on the back of this form. The alleys will be kept accessible for emergency vehicles. The city will be reimbursed for any missing/damaged barricades. All pop up tents, or inflatables will be properly secured. The named alleyways shall be closed and opened at the designated times.

Applicant Signature:		Date:	-
ApprovedDenied	Chief of Police:	Date:	
ApprovedDenied	Chief of Fire:	Date:	
ApprovedDenied	Public Service Director:	Date: _	
ApprovedDenied	City Manager:	Date:	
ApprovedDenied	Resolution/Motion by City Council (fo	r Seasonal Closure only)	
Comments:			
Cc: Police Chief Fire Chief Public Service Director Downtown Germantown Ma	nager	DATE FINAL APPROVAL:	
Additional Comments by Appli	cant:		

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NOTIFICATION FORM FOR DOWNTOWN ALLEY/STREET TEMPORARY CLOSURE

Event Date(s):_	
Event Name:	

This notification form should be completed by anyone, resident or business, within 200' and others affected by alley/street closure. We the undersigned acknowledge the notice of proposed alley closure as requested. Please write legibly.

NAME	ADDRESS	EMAIL	PHONE	YES	NO