APPLICATION FOR A STREET CLOSING PERMIT

The undersigned requests that a street closing permit be approved for the following activity:

Activity: ________________________________________________________________

Applicant: ___________________________ Applicant Email: _______________________

Address: _______________________________________________________________________

Phone:       Primary __________________________   Other _________________________

Location:  ________________________________  Business________________________

Date of Application: _________________________________________________________

Date of Activity:  ____________________________________________________________

Time Requested for Street Closure:  ____________________________________________

We agree to meet the following guidelines and assurances established by the City for the approval of street closings:

1. To be considered, the “Application for Street Closing Permit” must be submitted at least two (2) weeks prior to the proposed event.

2. A small (8 1/2” x 11”) map must be provided showing location of the proposed street closing and desired placement of barricades.

3. If applicable, a Noise Variance should be obtained from the Police Department and submitted with this application.

4. The approving signatures of 80% of the affected persons in a commercial district must be obtained. For residential areas, the approving signatures of 90% of the affected persons must be obtained. The signatures must be affixed to a document which clearly sets forth the nature of the event planned. (If the request is for Main Street between Jones and Porter or the Campus Corner area, a contact list will be provided by the City.)

5. Applicant must provide litter and trash pickup following the event, both within and without the closed area, if debris is scattered as a result of the event.

6. The proposed closure shall not interfere with any other scheduled event or pose any public safety threat.

7. No alcoholic beverages will be sold in the public right-of-way (wine, liquor, etc.).

8. The discretion of whether the Traffic Control Division will place and remove devices rests solely with the Public Works Department. Generally speaking, the closure of any multi-lane roadway or any roadway with a legal speed limit over 25 miles per hour will require the assistance of the Traffic Control Division. Any overtime costs with this requirement will be the responsibility of the applicant.

Revised 08-22-17
9. For those situations where the applicant is permitted to close the roadway, the applicant shall use City standard retro-reflective barricades which shall be obtained from the Traffic Control Division located at 1311 DaVinci Street, prior to 4:00 p.m., Monday through Friday. Pickup and return of barricades is the responsibility of the applicant. Arrangements may be addressed for the Traffic Control Division to deliver and pickup barricades for a fee of $60.00 each way. 

**Applicant must contact the Traffic Control Division (405)329-0528 to arrange pick up or delivery of barricades.**

10. Barricade locations shall be monitored by the applicant and only vehicles having legitimate need to pass through the area shall be allowed to do so.

11. No street shall be barricaded past the time designated on the permit.

12. Applicants will be responsible to the City to assure each of the guidelines are met.

13. The applicant may be required to provide the City evidence of an insurance policy taken out by the applicant which would indemnify the City of Norman against all damages or liability claims arising from the event.

14. The applicant shall be required to reimburse the City of Norman for any extraordinary costs incurred by the City such as overtime pay for personnel, special cleanup, etc.

15. If the application is approved, all residents and/or property owners, businesses, and places of assembly abutting the closed area, including side streets, must be notified of the closure.

Documents required in paragraphs 2, 3, 4, 5 and 14 shall be attached to this application.

<table>
<thead>
<tr>
<th>APPLICANT SIGNATURE</th>
<th>PRINTED NAME</th>
<th>DATE OF BIRTH</th>
</tr>
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**FOR OFFICE USE ONLY**

APPROVED  
DISAPPROVED

DATE _____________________________  
BY  _________________________________________  
NORMAN POLICE DEPARTMENT

FEE FOR APPLICATION IS $25.00  
RECEIPT # __________  
DATE ___________

Cash  
CC  
Check# __________  
Clerk __________

**PROVIDE APPLICANT WITH A COPY OF THIS PERMIT**

**cy:**  
City Clerk  
Patrol Major  
Communications Division  
Traffic Control Division  
Norman Fire Department

Revised 08-22-17