



TEMPORARY SIDEWALK USE PERMIT

Date: _____

Permit #: _____
(Office Use only)

Contact Name: _____

Company: _____

Mailing Address: _____

Contact Number: _____

Civic address the sidewalk is to be obstructed:

Property Owner: _____ **Authorization:** _____

Description of the work or reason the closure is required:

Fully Obstructed Partially Obstructed

Duration Permit is required (include Date and Time):

Start: _____ **End:** _____

Sketch/Map Required:

The permit holder agrees to indemnify the City from all claims which might be made against the City as a result of the use of the sidewalk for the described event.

A minimum of one metre measured from the curb must remain clear for the passage of pedestrians.

The undersigned, agrees to keep the City of Yorkton harmless and free from all claims for damages or injuries to any person, animal or property in any way arising from the use of the sidewalk during the event.

The undersigned, agrees to pay for any repair costs resulting from any damages to the City street, curb or sidewalk that occurred as a result of the event under this permit.

The applicant is responsible for providing barricades, pylons, etc. required to block or control traffic.

The applicant is responsible for contacting any property owners affected by the closure.

Signature of Applicant: _____ **Date:** _____

City Manager Designate Approval: _____ **Date:** _____

GL 9-10-301-018

FOR INTERNAL USE ONLY

Permit Fees:

\$ 25.00 (Base Fee)

_____ x \$5.00 per day = \$ _____ (Daily Fee)
No. of Days

_____ x \$25.00 per week = \$ _____ (Daily Fee)
No. of Weeks

\$ _____ **Total Permit Fee**

Circulated to RCMP, Fire Protective Services,
Ambulance and Public Works Dept.