

Request must be submitted to Public Works a minimum of three week prior to date of request.

Sumter County Board of County Commissioners
910 North Main Street, Bushnell, FL 33513
Phone: (352) 793-0200 * Fax: (352) 793-0207

TEMPORARY ROAD CLOSING REQUEST

Bushnell Fall Festival

Requested JOANN PITTS, Coordinator Date: _____
Address: P.O. Box 115 Phone & Fax #: 793-3907 / 793-7771
City, St, Zip Bushnell, FL 33513 Email Address: Cell 303-0629
j.pitts38@cfl.rc.com
Organization: _____

Date(s) Requested: October 16, 2010 (Saturday)

*Road(s) or Portion to be Closed: W. C-476 - SEMINOLE N. 475 / N. MAIN ST.
C-476A CR 311 / N WEST ST.
E-C476 C48 / WEST ST.
LAWRENCE @ 301.
SEMINOLE @ FLORIDA

*If Parade - Detailed Route: ATTACHED

*Attach map as applicable

Requested Time for Road Closure: 9:15 AM. To 10:45 AM

Requested Assistance or Equipment from Public Works

Date:

<u>Detour Signs, Road Close Signs + BARRICADES</u>	<u>10/15 - 10/16/10</u>
<u>Vehicles AS NEEDED</u>	<u>10/15 - 10/16/10</u>
<u>Any personnel deemed necessary after review of ^{detour} map by Road/Bridge Supervisor</u>	<u>10/15 - 10/16/10</u>

We understand that any request approved will be upon the following terms and conditions:

1. We shall be responsible for all safety and maintenance requirements in connection with the event.
2. We shall indemnify and hold the County harmless as to any liability which may result from any aspect of the event.
3. We shall be responsible for clean-up work which may be required as a result of the event.
4. It is understood that any request approved by the County shall in no way be construed by us to allow our event to take place on a State Road, and that any request approved is limited to the portion of the County Road described.
5. We agree that we shall make every effort for all participants in the event to comply with all state and local laws, and that the County Road mentioned above will be closed to the public only the day and time mentioned above, but not in excess of 1 hours.

Our signature below indicates our agreement to these terms and conditions.

Joann Pitts
Signature

JOANN PITTS
Printed Name

This request was approved in open session of the County Commissioners meeting, this _____ day of _____, 20____.

Attest: Gloria R. Hayward
Clerk & Auditor

Board of County Commissioners
Sumter County

By: _____

Deputy Clerk

Chairman