



ROUTT COUNTY

ROAD & BRIDGE

P. O. Box 773598
Steamboat Springs, CO 80477
970-879-0831

PERMIT NO. _____

NOTICE OF INTENT TO CONDUCT A SPECIAL EVENT OR PUBLIC FUNCTION ON PUBLIC R.O.W.

**ALL FIELDS ON THIS FORM MUST BE COMPLETED IN ORDER FOR FORM TO BE DEEMED
COMPLETE AND PROCESSED.**

Completed forms need to be received by our office four (4) weeks prior to event for processing. A Special Event Permit is required for any organized event in the County ROW. One permit maybe submitted for mutli-day or recurring events with the same or similar routes with all dates listed.

ORGANIZATION _____ NOTICE DATE _____

AUTHORIZED AGENT _____ TITLE _____

OFFICE PHONE _____ CELL _____ EMAIL _____

MAILING ADDRESS _____ CITY _____

STATE _____ ZIP _____

EVENT NAME _____

EVENT DATE (S) _____ DURATION:(Time)FROM: _____ TO _____

EVENT DESCRIPTION: _____

*PROPOSED ROUTE: _____

Event - Will Will Not block or restrict travel lanes.

*PROPOSED DETOUR _____

Will animals or unique vehicles, items, or substances be used in the event? If yes, explain

RULES OF THE ROAD

All participants must read and be aware of the following rules:

OBEY TRAFFIC LAWS, SIGNS AND SIGNALS

Bicyclists have all rights and duties applicable to the driver of any other vehicle and can be penalized for violating traffic laws.

RIDE SINGLE FILE

Ride two abreast only when you are not impeding traffic (front or rear) or when all cyclists are on the shoulder. On curving canyon roads, play it safe and ride single file.

REQUIRED INFORMATION

1. A map or diagram of the route, showing all control points, aid stations or other items in the ROW and any detours. A map of parking location(s) and number of spaces proposed for participants
2. A certificate of insurance naming Routt County
3. A Method of Handling Traffic (MHT) must be included with this permit application. The MHT shall include:
 - x A description of all road/lane/major intersection closures.
 - x A map showing location of traffic signs, flaggers, and other traffic control.
 - x Time frame for the closures.
 - x # of personnel involved with controlling closures (flaggers/marshals)
 - x Primary contact during closures (this may be the Traffic Control Supervisor)
 - x If primary or paved roads are utilized, certified paid traffic control or police is required
4. If event has subcontracted traffic control, please submit with this application: name of company and contact of traffic control supervisor (TCS) for event including TCS's cell phone number.

EVENT COORDINATOR

Phone # Office _____ Cell _____ Email _____

Signature _____ Print _____ Date _____

PUBLIC AGENCIES NOTIFIED

Applicant must acquire the following Signatures **prior** to submitting to R&B for approval for all events with more than 20 people and **ALL** events that block travel lanes.

STATE PATROL: Name _____ Date _____

SHERIFF'S DEPT: Name _____ Date _____

FIRE DEPT: Name _____ Date _____

ADJACENT PROPERTY OWNER NOTIFICATION: The applicant is responsible for coordination and notification with adjacent property owners prior to the event.

Return to: *Routt County Road & Bridge
Geovanny D. Romero. Field Coordinator
Phone: 970-870-5344
E-mail: gromero@co.routt.co.us*

ROAD AND BRIDGE APPROVAL

R&B COORDINATOR: _____ Date _____