

Port of Walla Walla 310 A Street Walla Walla, WA 99362

Phone: (509) 525-3100 Fax: (509) 525-3101

This is a request to utilize roads or property under the jurisdiction of the Port of Walla Walla. **The fee for this permit is \$20.** Please make checks payable to the Port of Walla Walla. Processing will commence upon receipt of payment of processing fee.

This permit is available at the Port of Walla Walla office or online at [Link TBD]

SPECIAL EVENT PERMIT APPLICATION

| Primary Contact: | | Cell Phone: |
|---|---------------|--|
| Secondary Contact: | | Cell Phone: |
| Name of Organization: | | Business Phone: |
| Name of Event: | | |
| Start End Time: | Appli Subn | ication nission Date: |
| Address of Applicant: | | |
| Email Address: | | Date(s) of Event: |
| Name of Emergency Medical Services Provider: | | |
| Dates of News Release: (Attach Copy) | | Expected Number of Participants: |
| All signing requirements and traffic control meets MUTCD, WA State Bicycle Racing Guidelines, RCWs and Rules of Road. (Be sure to attach a copy of your Traffic Control Plan) | Yes No | Expected Number of Participants on the Road at any One Time: |
| □ Map Included? | | Number of Traffic Control Personnel On Site: |
| Participant entry form includes indemnification and hold harmless clause on behalf of Port of Walla Walla. (Attach Copy) | Yes No | Number of Event Organizers On Site: |
| Certificate of Insurance Attached? (naming Port of Walla Walla as additional insured) | Yes No | Fire District Notified of the Event? Yes No |
| Certificate of Insurance—Liquor Liability? (If Alcohol is being consumed on premises) | Yes No | Law Enforcement Notified of the Event? Yes No |
| | | |

| 1-99 participant. The minimum Po \$2.00 or more for fee charged for event, the level the event, using ber of participandue and payable. | ial Events Policy (5/1 s shall be \$150.00, plermit Fee for events so ach individual particular part | us \$1.50 or more for sponsored by individenticipant if a fee is challing in cipant, may be adjust the entry fee to be conticipated number of e sponsor to the Port on to the required, r | r each individuals or entitivarged to parted in the so harged by the formant twiction to do not be the solution to do not | lual participant if a les involving 100 o ticipate in the even le discretion of the e sponsor. All Pern s, with a final payn | r fee is charged to r more participar nt. The minimum Port depending nit Fees shall be p nent adjustment onclusion of the | o participa nts shall be n Permit Fe on the nat paid 30 day based on t event. All F | te in the ever \$200.00, plue, including to cure of the ys in advance the actual nu Permit Fees a | nt. us the e of im- are |
|--|---|--|---|---|---|---|--|--|
| Check Here if there is a fee for participati in the Event. | | Total Special Event Fee: | | | Speci | al Event Yes | Fee Include N | ed? No |
| HOLD HARMLESS AND INDEMNIFICATION AGREEMENT Applicant/organization indemnifies and holds harmless the Port of Walla Walla from any suit, claim or action for injury or death or other cause of property damage arising from the issuance of this permit. Applicant certifies that the information given herein, including all submittals and attachments is true and correct to the best of his/her knowledge. Applicant understands that conditions may be placed on this request if approved. | | | | | | | | |
| Signature: | | | | | | Pri | nt Form | 1 |
| Printed Name: | | | | | | (Revis | sed 6/26/2015) | |
| Events with Bicycles must fill out page three of this permit and attach a traffic control plan. Other events may be required to submit a traffic control plan as well. | | | | | | | | |
| Port Use C | Only | | | | | | | |
| Application Fee Paid? (| | ☐ Yes ☐ No | Special Ev | vent Fee of \$ | | | ☐ Yes | |
| Fire District Notified? | t | ☐ Yes ☐ No | | e of Insurance A ed as additiona | | | ☐ Yes ☐ No | |
| Law Enforc Notified? | ement | ☐ Yes ☐ No | | e of Insurance for Port named as | • | • | ☐ Yes ☐ No | |
| Traffic Plan (If required | | ☐ Yes ☐ No | | | | | | |
| Approved: | | | | Date: | | | | |



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This page must be submitted for bicycle events. Please be as clear and accurate as possible to avoid delays in processing.

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BICYCLE SUPPLEMENT (Page 3)

| Sanctioning Organizations: | | | |
|---|---|-------------------------------------|---|
| Please check all that apply: Enclosure(s) Totally Open Racecourse Partially Open Racecourse Rolling Enclosure Protected Enclosure Caravan Other (Explain Below) | Race(s) Criterium Time Trial Road Race Stage Race Cyclocross Mountain I Multi-Spor | Bike t Time Trial t Road Race | Racecourse(s) Point to Point Circuit Out and Back Rolling Enclosure Other (Explain Below) Traffic Control Plan Attached |
| Race Date: Start Location: | Time: | Race Type: Finish Location: | |
| Race Date: Start Location: | Time: | Race Type: Finish Location: | |
| Race Date: Start Location: | Time: | Race Type: Finish Location: | |
| Race Date: Start Location: | Time: | Race Type: Finish Location: | |
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