



**West Bloomfield Township  
Clerk's Office**  
4550 Walnut Lake Road  
West Bloomfield, MI 48323  
(248) 451-4848 Phone  
(248) 682-3788 Facsimile  
[www.wbtwp.com](http://www.wbtwp.com)

## Parade/Banner/Road Closure Permit Application and Requirements

**Note:** This application is pursuant to the requirements of the Oakland County Road Commission.

A permit is necessary for such organized activities as parades, walkathons, marches, bicycle parades, parties, festivals, carnivals, outdoor gatherings, banners, etc., where roads may or may not be closed during the event, and where the event may cause congestion because of the interest it attracts. Please note the following: Applicants must contact DTE at (248) 745-5015 for placement of Over-the-Road Banners; a Community Special Event Sign Permit Application may be required by the Planning Department as well. For more information please call the Planning Department at (248) 451-4811.

### PARADE/BANNER/ROAD CLOSURE DETAILS

**Submit application at least sixty (60) days prior to the date of assembly** in order to insure adequate review time by the Clerk, Police, Fire, and Planning Departments, as well as time to add the request to the agenda of the next available Township Board meeting for final approval.

Name of Organization: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name of Subdivision or Group

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Type of Event: \_\_\_\_\_

Dates(s) of Event or Banner Display: \_\_\_\_\_ Hours of Event: \_\_\_\_\_

Will your event require the closure of any public right-of-way?     Yes     No

If yes, date(s) of closure: \_\_\_\_\_ Location of Closure: \_\_\_\_\_

Insurance: \_\_\_\_\_

Bonding: \_\_\_\_\_

**Provide an explanation and attach a diagram of the parade route and/or banner:**

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**Note:** Signage other than the banner requested in this application will require a Temporary Sign Permit. Please contact the West Bloomfield Township Planning Department at (248) 451-4811 for requirements.

**GENERAL REQUIREMENTS**

**GENERAL LIABILITY INSURANCE** must be obtained in the following amounts:

	<b>Bodily Injury</b>	<b>Property Damage</b>
General Liability (Including injuries to participants)	\$500,000.00	\$100,000.00
Auto Liability (Including owned, non-owned and hired vehicles)	\$500,000.00	Combine Single Limit For Both

**Certificate of Insurance** must name **West Bloomfield Township** and the **Road Commission for Oakland County** as added insured.

Upon receipt of this request, the Township Board will then authorize the Clerk to make an application to the Road Commission for Oakland County for the permit.

**Letter of Indemnification**

The following must be signed by the President, Vice President/Secretary and Treasurer of your group. After it has been fully executed and returned to the Township Clerk along with all parts of this application, it serves as a Letter of Indemnification.

**We, the Board of Directors of the** \_\_\_\_\_ **do hereby indemnify and**  
Name of Subdivision or Group

**save harmless all persons of claims of every kind arising out of operations from the activities to be held by** \_\_\_\_\_ **scheduled for** \_\_\_\_\_.  
Name of Subdivision or Group Date(s) of Activity

**In addition, we, our heirs, our executors, administrators and assigns do hereby release and discharge the members of the West Bloomfield Township Board and the members of the Road Commission for Oakland County from all claims of damages, demands, actions and causes of action whatsoever, in any manner arising or growing out of their participation in said event.**

_____ WITNESS	_____ DATE	_____ PRESIDENT	_____ DATE
_____ WITNESS	_____ DATE	_____ VICE PRESIDENT	_____ DATE
_____ WITNESS	_____ DATE	_____ TREASURER	_____ DATE

When completed, return to: **DEBBIE BINDER, Township Clerk**  
 West Bloomfield Township Hall  
 4550 Walnut Lake Road  
 P.O. Box 250130  
 West Bloomfield, MI 48325-0130

**For Township Use Only:**

- Letter of Indemnification signed
- Insurance Certificate provided with appropriate added insureds

Reviewed by Fire Department:  Approved  Denied Date: \_\_\_\_\_

Reviewed by Planning Department:  Approved  Denied Date: \_\_\_\_\_

Reviewed by Police Department:  Approved  Denied Date: \_\_\_\_\_

Township Approval: \_\_\_\_\_  
**Debbie Binder, West Bloomfield Township Clerk**

Upon Board Approval Send:

Notice to RCOC Date Sent: \_\_\_\_\_

Notice to applicant Date Sent: \_\_\_\_\_