



# Obstruction Permit

Name/Contractor: \_\_\_\_\_ Address: \_\_\_\_\_

City \_\_\_\_\_ E-mail address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

The applicant hereby requests permission to obstruct the street area per the following detailed description:

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The obstruction is for the purpose of:

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Said work is to be completed within \_\_\_\_\_ days from \_\_\_\_\_ (date) to \_\_\_\_\_ (date).

The applicant herein assume all responsibility for any claim of damage or injury against the Village caused by such obstruction.

The applicants hereby agrees that they will sign and barricade the work site according to the latest Wisconsin Department of Transportation Manual of Uniform Traffic Control Devices and is liable for all damages for failure to erect and maintain suitable barricades, signs and lights.

The applicant is liable for all costs of any damage or repairs and will be billed for these costs. Said applicant hereby certifies that they have any required Bond and Certificate of Insurance filed with the Village of Howard attached. Applicant is responsible for snow removal.

**Indemnification:** By registering with the Village, or by accepting a permit under this Chapter, a registrant or Permittee, as the case may be, agrees to indemnify, defend, and hold harmless the Village, its officers, boards, committees, commissions, elected officials, employees and agents (collectively, "Indemnified Parties"), from and against all loss or expense (including liability costs and attorney's fees) by reason of any claim or suit, or of liability imposed by law upon an Indemnified Party for damages because of bodily injury, including death at any time resulting therefrom, sustained by any person or persons or on account of damages to property, including loss of use thereof, arising from, in connection with, caused by or resulting from the permittee's acts or omissions in the exercise of its rights under this permit, whether caused by or contributed to by the Village or its agents or employees.

**Minimum Insurance requirements:** The limits of liability for the insurance shall provide coverage for not less than the following amounts or greater where required by Laws and Regulations:

1) Workers' Compensation, and related coverage's

- a) State: Statutory
- b) Applicable Federal (e.g., Longshoreman's): Statutory
- c) Employer's Liability: \$500,000

2) General Liability shall include completed operations and product liability coverage's

- a) General Aggregate \$1,000,000
- b) Products – Completed Operations Aggregate \$1,000,000
- c) Personal and Advertising Injury (per person/organization) \$1,000,000

- d) Each Occurrence (Bodily Injury and Property Damage) \$1,000,000
- e) Personal Injury Liability Coverage will include Claims arising out of Employment. \$1,000,000
- f) Exclusions of property in contractors Care, Custody or Control \$1,000,000
- g) Property Damage liability insurance will provide Explosion, Collapse, and Under-ground coverage's. \$1,000,000
- h) Excess or Umbrella Liability
  - i) General Aggregate \$2,000,000
  - ii) Each Occurrence \$2,000,000

3) Automobile Liability: Owned, hired, and non-owned vehicles

- a) Bodily Injury:
  - i) Each person \$1,000,000
  - ii) Each Accident \$1,000,000
- b) Property Damage:
  - i) Each Accident \$1,000,000
  - ii) Combined Single Limit of \$1,000,000

4) The Contractual Liability coverage shall provide coverage for not less than the following amounts:

- a) Bodily Injury:
  - i) Each Accident \$1,000,000
  - ii) Annual Aggregate \$1,000,000
- b) Property Damage:
  - i) Each Accident \$1,000,000
  - ii) Annual Aggregate \$1,000,000

5) Liability coverage for others listed below will be provided, subject to customary exclusions for professional liability

- a) By endorsement as additional
  - i) Insured's on Liability Policy. \$3,000,000
  - [or]
  - ii) By a separate Protective Liability Policy covering all of them issued by general liability carrier.

6) List of Additional Insured's:

- a) *Village of Howard*
- (provide an original endorsement of coverage with certificate of insurance)

\_\_\_\_\_ Date

Authorized Contractor Signature

**OFFICE USE ONLY**

Permission is hereby granted to do the above work as described herein.

Copy of Liability Insurance Attached Yes / No

Bond required? Yes / No If yes, Amount \$ \_\_\_\_\_ ck# \_\_\_\_\_

Street obstruction allowed: Yes / No If yes, From: \_\_\_\_\_ To: \_\_\_\_\_

\_\_\_\_\_ Date

Director of Public Works