

POLICY NUMBER: 2009-01

COVERAGE: MUNICIPALITY

COUNCIL APPROVAL: OCTOBER 13, 2009

EFFECTIVE DATE: IMMEDIATE

## **CLOSURE OF STREETS FOR SPECIAL EVENTS**

## BACKGROUND

The Town receives requests from organized groups to close certain Municipal Streets to allow special events. It is recognized that the closure of Streets, have the following potential impacts:

- Positive or Negative effect on Businesses
- Inconvenience to merchants
- Negative impact on neighbouring areas
- Safety considerations

In the past, the approval of requests for street closure has been “ad-hoc”, with Council considering written requests from event organizers. The following Policy is designed to address the issues related to Street closure.

## POLICY

1. This Policy does not apply to Provincially-Designated Highways. Such highways cannot be closed, except in the case of emergency for the purpose of firefighting, major repairs, police action or a declared emergency.
2. Only requests submitted by Organizations (not individuals) shall be considered.
3. Applications must be submitted in the application form provided no later than 14 days prior to the next regularly-scheduled meeting of Town Council and at least 30 days prior to the requested date. The application must be completed and duly signed by an officer of the Organization concerned.
4. In reviewing requests the Council shall consider:
  - (a) The routing of Traffic to ensure that adjacent areas are not adversely affected.
  - (b) The potential impacts on business/residents that are outside of the proposed Street closure area.
  - (c) The impact on business and residents within the proposed closure area.
  - (d) Parking
  - (e) Public Safety
  - (f) The benefits to the Community

**TOWN OF WOODSTOCK**  
**TEMPORARY ROAD CLOSURES**  
**APPLICATION FORM**

**APPLICANT INFORMATION**

Business Name: \_\_\_\_\_

Charitable Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**ROAD CLOSURE INFORMATION**

Street(s) Affected: \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

Dates Requested: From \_\_\_\_\_ To \_\_\_\_\_

Times Affected: From \_\_\_\_\_ To \_\_\_\_\_

Parties Assisting in Traffic Control: \_\_\_\_\_

Purpose for the Temporary Road Closure:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special Conditions: \_\_\_\_\_

Public Liability Damage Insurance Certificate Enclosed?      \_\_\_ YES      \_\_\_ NO

\_\_\_\_\_  
Applicant's Signature

***The Applicant agrees that they have familiarized themselves with the requirements and Guidelines for Road Closures and agrees to comply with all of the conditions.***