



Town of Pagosa Springs
550 Pirate Drive P O Box 3249 Pagosa Springs, CO 81147
Phone 970-264-4151 Ext 400 Fax: 970-264-4634
PERMIT REQUIRES 48-HOUR NOTICE FOR PROCESSING

PERMIT NUMBER

Valid until work or
event permit expires
or otherwise noted.

TRAFFIC MODIFICATION FORM

Applicant / Permittee

Name _____
Company _____
Address _____
City _____ State _____ Zip _____
Phone _____ Email _____

Location / Description of Traffic Impact Planned Start Date: _____ Planned End Date: _____

Address / Location: _____ Additional Sites: _____ Total _____

TYPE OF CONSTRUCTION	EVENT	LENGTH OF TIME OF IMPACT
<input type="checkbox"/> New <input type="checkbox"/> Repair	<input type="checkbox"/> Fixed Location	Number of Days:
<input type="checkbox"/> Excavation <input type="checkbox"/> Surface	<input type="checkbox"/> Moving Event	Hours per Day:
	<input type="checkbox"/> Other (Describe)	Number of Participants:
<input type="checkbox"/> Gas <input type="checkbox"/> Electric		Number of Spectators:
<input type="checkbox"/> Driveway <input type="checkbox"/> Fiber		Square Footage of Surface Improvements:
<input type="checkbox"/> Storm Water <input type="checkbox"/> Irrigation		Attach Applicable Copies of the Following:
<input type="checkbox"/> Potable Water		<input type="checkbox"/> Event Permit <input type="checkbox"/> Certificate of Insurance
<input type="checkbox"/> Sanitary Sewer		<input type="checkbox"/> Traffic Control Plan <input type="checkbox"/> Responsible Party ID
<input type="checkbox"/> Other		<input type="checkbox"/> Traffic Control Sketch <input type="checkbox"/> ROW Permit
		<input type="checkbox"/> Other

Description of Closure: _____

By signing this form, the applicant agrees to the terms and conditions of the Pagosa Springs Municipal Code, Chapter 17, Article 2, and as described herein. The applicant verifies that applicant and/or its contractors are not delinquent in payments due to Town on prior work, that applicant and/or its contractors holds all permits or licenses (including required insurance, deposits, bonding, and warranties) required to do the proposed work, if such licenses or permits are required under the laws of the United States, the State of Colorado, or the Ordinances of the Town, and that all orders issued by the Town to the applicant and/or its contractor requiring correction of deficiencies under previous permits have been satisfied. The applicant agrees that the town accepts no liability for advice or requirements associated with this form.

Applicants Signature: _____ **Date:** _____

OFFICE USE ONLY

Additional Conditions \ Comments: _____

Administrative Fee: _____

Inspector: _____

Inspection Fee: _____

Inspection Date: _____

Total: _____

Issued By (Town Staff): _____ **Date:** _____

TRAFFIC CONTROL PLAN

Please provide a sketch of the traffic modifications to be completed. Include street names, landmarks, hardscape, a North arrow, and other pertinent information.

Conditions of Permit:

1. Proof of insurance shall be submitted to the Town of Pagosa Springs. The undersigned permittee hereby agrees to indemnify and hold the Town of Pagosa Springs, its agents and employees, harmless from any and all liability arising from the activities of the permittee covered by this permit, including court costs and reasonable attorney fees.
2. A cash amount or an active warranty bond shall be deposited with the Public Works Department prior to the issuance of a permit. This bond may be waived, combined, or modified at the Public Works Director's discretion.
3. All traffic modifications must be completed within the date(s) on this permit. If an extension is required, the Public Works Department must be notified prior to the expiration of the permit and notification of any prolonged street closures must be made as designated.
4. **R.O.W. WORK.** If work is occurring in the Public Right of Way, a ROW permit shall be submitted to the Town of Pagosa Springs Public Works Department. Unsafe conditions caused by this permitted work may be corrected by the Town and all costs of correction shall be billed to the Applicant.

The Applicant shall be fully responsible for notification of all adjacent property owners, affected parties, and property owners who may potentially experience restricted access at least 48 hours in advance of work. The applicant is responsible for notifying the following agencies:

- Archuleta County Joint Dispatch Center - 970-264-8430
 - Town of Pagosa Springs Police Department – 970-264-4151 x228
 - Pagosa Springs Medical Center Emergency Medical Services - 970-731-3700
 - Mountain Express Transit – 970-264-2250
 - Archuleta County Joint 50 School District Transportation Department - 970-264-0392
 - Colorado Department of Transportation (if applicable) - 970-385-3626
5. After completion of the closure, the affected area shall be returned as near as possible to its condition prior to the closure within fifteen (15) days.
 6. Closures are not allowed overnight without prior approval of the Public Works Director or designee.
 7. Applicant must give Public Works a 24-hour notice of any changes to the submitted permit (970-264-4151).
 8. Traffic Sketch Page - The Applicant shall provide a sketch of the work to be done, including street names, street edges, sidewalks (if appropriate), approximate locations of all utilities in relation to the closure, a North arrow, and other pertinent information.
 9. Applicant or their agent shall keep a copy of this permit on site and available for inspection by authorized Town employees.
 10. Applicant agrees that the Town shall be indemnified and held harmless from any and all damages caused by work associated with this permit.
 11. Permittee shall be responsible for all penalties and repair costs as a result of damage resulting from the closure to property either owned by the Town or otherwise, in accordance with Town Code, Town Resolution, or as identified in this permit.