



Temporary Road Closure/Usage Application

Name of Event: _____

Township Road Location(s): _____

Date(s): _____ Time(s): _____

Organization (legal name): _____

Main Contact: _____ Phone (daytime): _____

Address: _____ Phone (evening): _____

1. Detailed description of event: _____

2. Does the event require:

- Road Usage (*please attach a map of the locations for the requested road usages with identifiable markers*)
- Road Closure (*please attach a map of the locations for the requested road closures with identifiable markers, **road closures must be clearly distinguished from road usages***)
- Traffic Management Plan (*please attach a map of the precise locations for the requested detour route*)
- Restricted Parking Areas (*please attach a map of the precise locations of the restricted parking areas*)
- Mobile Advertising Signs (*please attach the precise locations/specification for the requested signs*)
- Tents (*please attach the precise locations/specification for the requested tents*)

Please inquire with the Township about any road closures due to construction or maintenance projects to avoid any conflicts with your scheduled event.

3. Are you planning to serve alcohol? _____ If yes, please provide details: _____

Note: A special occasion permit must be obtained by the applicant from the L.C.B.O. [LCBO Permit](#)

4. Please specify any requested use of Township resources (Traffic cones, barricades etc.):

5. If the closure / usage involves a District Road, please fill out an application on their website:

[District Permit Application](#)

6. Certificate of Liability Insurance must be obtained naming the Township as additional insured.

Applications must be submitted to The Township of Muskoka Lakes at least sixty (60) days prior to the proposed event.

SIGNATURE

DATE



Municipal Approval Section

Muskoka Lakes Permit Number: _____

Emergency Services to be notified:

- Police (*Bracebridge OPP*): _____
- Ambulance (*District of Muskoka*): _____
- Fire (*Muskoka Lakes Township*): _____
- School Board (*specify school boards notified*): _____

On the basis of this application and all pertinent schedules and by-laws and notwithstanding any other liability, approval, regulation, by-law, or provincial statute, the applicant is herewith approved to proceed with the road closure / usage as requested.
This permit is issued by the Director of Public Works under the authority of Township of Muskoka Lakes By-Law 2019-060.

Comments:

Proof of Liability Insurance provided: Yes No **Road Section No:** _____

Date: _____

Signed: _____

Kenneth D. Becking, P.Eng., Director of Public Works

Personal Information on this form is collected by Township of Muskoka Lakes under the authority of The Municipal Act, 2001, S.O. 2001, c.25, as amended and any by-laws passed pursuant to it and for the purpose of an Application & Permit for Township of Muskoka Lakes Temporary Road Closure / Usage and for no other purpose. Applicants are advised that Muskoka Lakes may be required to disclose information in this form under the Municipal Freedom of Information and Protection of Privacy Act. Questions should be directed to the Township of Muskoka Lakes, 1 Bailey St. Port Carling, ON, P0B 1J0