SPECIAL EVENT CHECKLIST

Event Name__________________________Event Date___________________

Event Time___________________

___ Insurance Certificate - The Certificate must show (in the Description of Operations/locations/vehicles section) Tuolumne County, its elected and appointed officials, officers, agents, employees and volunteers, as additional insured, against loss or liability caused by or connected with the performance of this Special Permit No. (issued by the County), the name of the event and date of the event. (See Exhibit A)

___ Map/Traffic Plan listing the following:

✓ _____ Show Directional Arrows
✓ _____ Show Placement of Barricades/Warning Signs
✓ _____ Show Placement of Detour Signs
✓ _____ Show Placement of Traffic Control Personnel
✓ _____ Showing Parking area(s) used during the event

Please provide us with the information below that pertains to your event;

  Number of - Highway Patrol Personnel
  Number of - Community Service/Volunteers Patrol
  Number of - Barricades/Warning Signs
  Number of - Detour Signs
  Number of - Vests/Warning Paddles
  Number of - Radios/Walkie Talkies
  Number of – Other

--Office Use--

Date Received______________________________________________________