



TEMPORARY STREET USE PERMIT

Application Fee: \$190.00

APPLICANT INFORMATION

Name _____
 Company _____ Email _____
 Address _____
 Phone _____ Fax _____

DATE(S), TIME(S), and LOCATION OF ACTIVITY

Date(s) from _____ to _____
 Time(s) from _____ to _____
 Street Name(s)/Location _____

INSURANCE POLICY - Permit is not valid without insurance.

The City of Mission must be named as additional insured on policy for minimum \$5,000,000 liability.

Policy _____ Expiry _____


TRAFFIC MANAGEMENT DETAILS - (activities, obstructions, closure(s) in the road or sidewalk)

The City of Mission reserves the right to require a Traffic Management Plan (TMP) for any Street Use Permit Application.

TMP Attached MoTI Traffic Management Manual for Work on Roadways Figure: _____

The Applicant hereby agrees:

- a) To indemnify and save harmless the City against all claims, liabilities, judgments, costs and expenses which may accrue to or against the City in consequence of granting this permit.
- b) To produce this permit for inspection when so requested by any Peace Officer or representative of the Municipal Engineer.
- c) Site must be left in the same condition as it existed at the time the permit was issued. All damage to City property shall be restored to the existing condition or better at the expense of the applicant.
- d) All signing/delineation must conform to BC Ministry of Transportation and Infrastructure's 2015 Interim Traffic Management Manual for Work on Roadways at the expense of the applicant.

Signature of Applicant  Date _____

Please submit to: City of Mission, 7337 Welton Street, Mission, BC V2V 3X1
 Phone: 604-820-3736; Email: engineering@mission.ca

FOR OFFICE USE ONLY

Date October 26, 2023 Expiry Date July 31, 2024

Permit No. 2023-146 Receipt No. I7-3110365

Comments Permit holder to provide 72hr advance notification to neighbouring properties prior to setting up barriers and fencing. This permit serves as a placeholder for future prime contractor of MOTI's Truck Reroute Project. The successful bidder for this project will see this permit amended with their insurance and contact information as discussed.

J. Van Egmond
 Permit Approved by

Signature 

This permit must be carried at all times and be available upon request.



ROAD CLOSURE FORM

ROAD CLOSURE DETAILS

Road Name _____

DATE(S) AND TIMES OF ACTIVITY:

Date(s) From: _____ To: _____
(yyyy-mm-dd) (yyyy-mm-dd)

Time(s) From: _____

TYPE OF CLOSURE:

- Single Lane Closure
 Sidewalk Closure
 Full Road Closure

REASON FOR CLOSURE: _____

If this is for a full closure, will emergency vehicles have access? Yes No N/A

Is the closure along a bus route? Yes No

Will the closure affect a bus stop? Yes No

APPLICANT INFORMATION

Name _____

Company _____ Email _____

Address _____

Phone _____ Fax _____

Applicant's Signature  _____ Date _____

City Contact: _____ Phone: _____

Please submit to: City of Mission, Engineering & Public Works Department

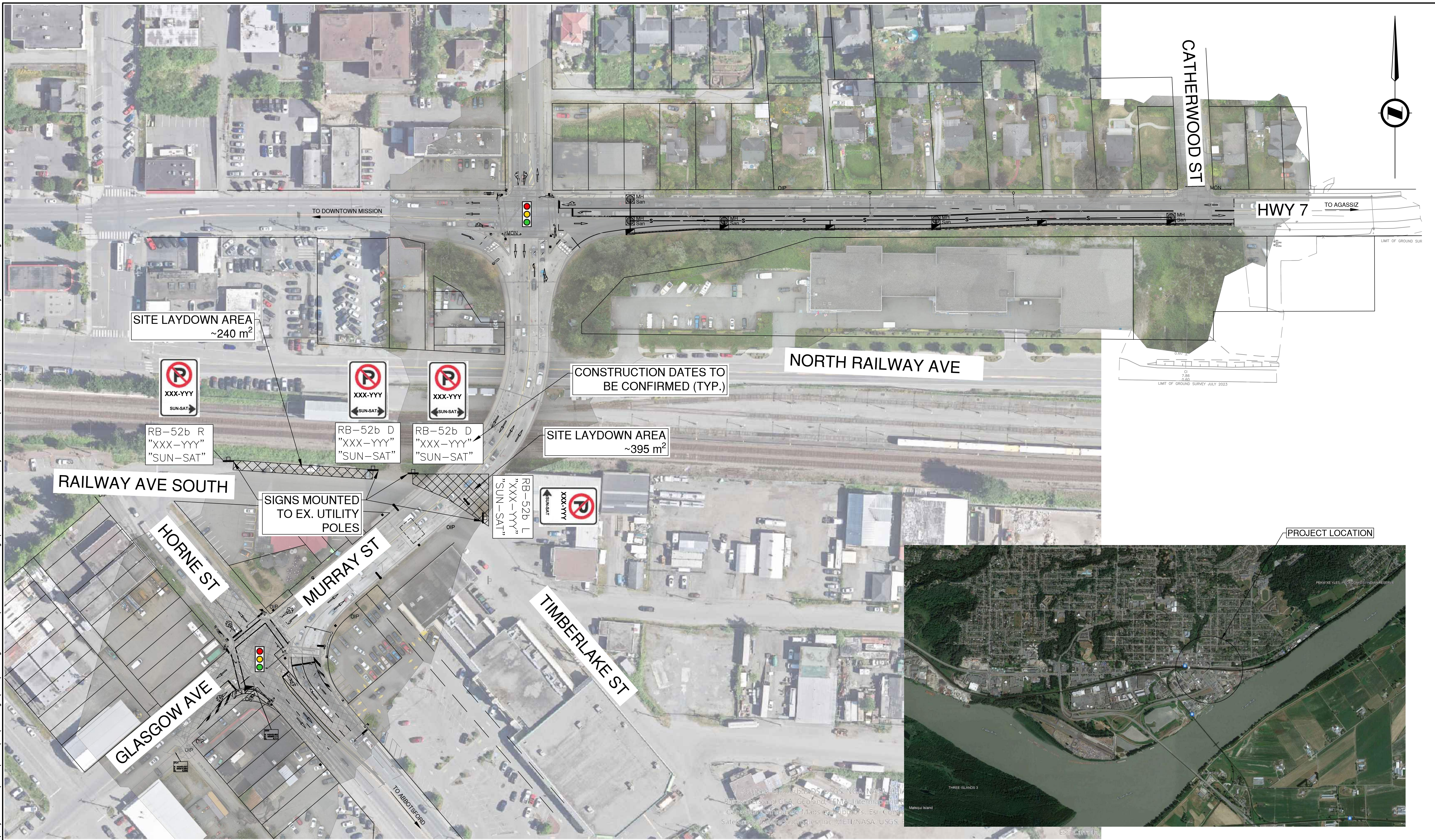
FOR OFFICE USE ONLY

- City Sign Crew Required OR Contractor will be Handling Signage

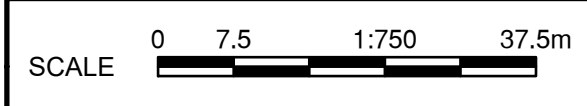
Public Works Clerk Notification:

- | | |
|--|--|
| <input type="checkbox"/> RCMP..... Fax 9-604-820-3548 | <input type="checkbox"/> 911..... 911dispatch@fvrd.bc.ca |
| <input type="checkbox"/> Ambulance..... Fax 9-604-826-1844 | <input type="checkbox"/> Fire Dispatch..... firedispatch@fvrd.bc.ca |
| <input type="checkbox"/> Transit..... Fax 9-604-854-3598 | <input type="checkbox"/> School Bus (Mission)..... jodi.marshall@mpsd.ca |
| | <input type="checkbox"/> Garbage Pick Up..... kdyck@gflenv.com |
| | <input type="checkbox"/> Engineering Division..... engineering@mission.ca |
| | <input type="checkbox"/> Fire Shift Captain..... shiftcaptain@mission.ca |
| | <input type="checkbox"/> Mission Duty Chief..... missiondutychief@mission.ca |

PLOT DATE: 2023/10/04 U:\Projects_SUR\1961\0504\03\0-Design\CAD\DrawingProduction\2300_SiteLaydownAreas\2023-08-25_SiteLaydownAreas (SK1-033)\2023-09-13_SiteLaydownAreas.dwg



ISSUED FOR DISCUSSION
2023-09-13
urbansystems.ca



CAD FILENAME: 23-09-13 SITE LAYDOWN AREAS
PLOT DATE: 2023-09-13



MINISTRY OF TRANSPORTATION AND INFRASTRUCTURE
SOUTH COAST REGION
HIGHWAY ENGINEERING AND GEOMATICS



SITE LAYDOWN AREAS
HWY 7 / HWY 11
MISSION TRUCK REROUTING INTERSECTION IMPROVEMENTS

REV	DATE	REVISIONS	NAME

SENIOR DESIGNER _____
DATE: 2023-09-13

DESIGNED: A. HARRIS DATE: 2023-09-13
QUALITY CONTROL: J. MACMILLAN DATE: 2023-09-13
QUALITY ASSURANCE: J. BORCH DATE: 2023-09-13
DRAWN: M. MENEZES DATE: 2023-09-13

FILE NUMBER	PROJECT NUMBER	REG	DRAWING NUMBER	REV
1961.0504.03	13216-0001	1	SK1-033	A

CITY OF MISSION
CASH RECEIPT

Province of British Columbia
Receipt #: I7-3110365

Teller:cashreg 26/10/23 10:16

22 Engineering Fees	
46 TEMPORARY USE PERMIT	\$190.00
17300-500	
SUP2023-146	

Amount Paid by Cheque: \$190.00

Thank you.ck

GST# #: R107021354

AMOUNT TENDERED	\$190.00
CHANGE DUE	\$0.00