

Paint Creek Trail Temporary Permit Application Process

1. A Temporary Permit is required for any event or project that has 35 or more participants.
2. Print/complete Application for Temporary Permit
3. Call Trailways Coordinator at Commission Office, (248) 651-9260, request to be on first available meeting agenda.
4. Application Fee: \$25. Make check out to: Paint Creek Trailways Commission
5. Event Insurance: Paint Creek Trailways Commission must be listed as additional insured on event insurance policy.

Paint Creek Trailways Commission meetings:

The Commission meets monthly, on the Third Tuesday of each month, at the Rochester Municipal offices, 400 Sixth Street, Rochester, MI 48307. Meeting starts promptly at 7:00pm.

An event representative must be present with completed application, and \$25. Proof of event insurance listing the Paint Creek Trailways Commission as additional insured must be received prior to event. Commission will request information regarding event before making a decision (who, what, where, etc)

Questions? Contact the Trailways Commission at:

Paint Creek Trailways Commission
4393 Collins Road
Rochester, MI 48306
(248) 651-9260
(248) 601-0106 (Fax)
www.paintcreektrail.org
E:mail: PaintCreekTrail@aol.com

**Paint Creek Trailways Commission
Application for Temporary Permit**

Permit Number _____

Name of Applicant: _____

Contact Person: _____

Address: _____

Telephone: () _____ () _____

Email Address: _____

1. Name of Event or Project: _____

2. Describe intended use: _____

3. State desired term or duration of permit:
START Date/Time: _____ END Date/Time to: _____

4. Is entire Trail (from Rochester to Lake Orion) to be used for event or project? If not, specify nearest cross streets to start and end points: _____

5. How many participants are expected? _____

6. Will motor vehicles be used on the trail for this event? () NO () YES, how many? _____

Make/Model of vehicle: _____

License Plate Number _____

Insurance Company _____

Policy # _____

Name of Driver: _____

7. Will parking be required? () NO () YES, how many cars? _____

Location: _____

(NOTE: If parking at Rochester Municipal Park, you must call Bruce Austin, Rochester Parks and Recreation Supervisor at (248)-651-9061)

TERMS:

1. This permit is issued for the dates and times listed above and for the purposes authorized and for no others. THIS PERMIT CAN BE TERMINATED BY REPRESENTATIVES OF THE TRAILWAYS COMMISSION AT ANY TIME, WITHOUT NOTICE AND WITHOUT CAUSE. The permit holder agrees that in the event his/her permit is terminated, he/she leaves the Trail property and will have no claim against the Commission or any of its representatives.
2. The permit holder agrees and understands that this permit is not and shall not create a lease, easement or other rights not specifically identified in this document. No changes are allowed unless in writing. THE PERMIT HOLDER CANNOT ASSIGN THIS PERMIT TO ANY ONE ELSE.
3. The Commission shall not be liable to the permit holder or anyone authorized above for any loss, injury, or damage to persons or property while they are on or around trail property. All motor vehicles used must be insured. The permit holder agrees to hold the Commission, governments and representatives harmless and shall indemnify and defend them from all losses, injury, damage or claims by anyone for any reason caused by or growing out of the use of this permit or activities authorized by this permit.
4. The permit holder must conform to all federal, state, and local laws, ordinances, rules and regulations. The permit holder may be required to obtain other governmental permits, or authorization of neighboring property owners and if so must do so at his own expense.
5. Notices, if any are needed, shall be sufficient if mailed by ordinary mail to the permit holder at the address above.
6. Permit holder or user (s) shall show identification if requested to do so by a law enforcement officer, community representative, or commission representative.

THE UNDERSIGNED AGREES TO THE ABOVE TERMS:

Signature of Applicant/Contact: _____

Print or Type Name: _____ Date: _____

Application: () Approved () Denied because _____

Signature PCTC: _____ Date: _____

Date Application Rec'd: _____ Amount Received: _____ Ins. Received _____

For Internal Use Only

***** Tear off and return to applicant *****

Your application for a temporary permit to use the Paint Creek Trail has been _____ for the following date: _____ Permit Number: _____

If you have any further questions, please contract the PCTC Coordinator at 248-651-9260.

Signature PCTC: _____ Date: _____