



CITY MANAGER'S OFFICE
CITY OF WHEELING

April 29, 2020

Dear Applicant:

Enclosed please find an Application for use of City of Wheeling Right of Way, a copy of Section 311.05 of the Municipal Code, as well as a sample certificate of insurance, all of which are being supplied to you in response to your recent request to utilize City right of way in connection with your planned event. Please complete and sign the application, providing a current e-mail address for the permit to be returned to you, and forward to my attention, along with your certificate of insurance **naming the City of Wheeling as an additional insured along with the required language that is highlighted at the bottom of the sample certificate of insurance**, at your earliest convenience. Please note that the application must be received by the City of Wheeling at least **ten business** days prior to your proposed use to allow ample time for processing your request. If your planned event is a parade, run, walk or street fair, contact must be made with Lt. Josh Sanders (304-234-6434) in order to finalize all safety concerns prior to the issuance of a permit. If your event will include food vendors, it will be your responsibility to ensure that all are properly licensed through the City of Wheeling and you will required to ensure that all participants obtain the necessary permits from the Wheeling-Ohio County Health Department (304-234-3682).

Should you have any questions regarding the above, please do not hesitate to contact me at 304-234-3617.

Sincerely,

Judy Beabout
City Manager's Office

jb

Enclosures



APPLICATION FOR USE OF CITY OF WHEELING RIGHT OF WAY

Date of Application	
Name, Address and Phone Number of Applicant	
Person to contact (including phone number) in case of emergency during use	
Date(s) and Time(s) of Proposed Use	
Description of Proposed Use (i.e., Street Fair, Run, Parade, etc.)	
City Rights of Way to be Utilized (i.e., City Streets obstructed); Proposed Detours, if applicable.	

The undersigned, on behalf of _____ (name of individual/organization), agrees to indemnify and save the City of Wheeling harmless from any claims, liability or damages arising from the use of the public way in connection with the above-described use and as set forth in Section 311.05(b) of the Municipal Code. Additionally, your signature indicates that it is understood and agreed that any insurance carried by the City of Wheeling is excess and in no way contributory or quota share.

Name and Title

Date

valid e-mail address (Permit will be provided via e-mail)

For office use only:

_____ CODES _____ FD _____ PD _____ OP _____ CC _____ HEALTH