

BOARD OF SUPERVISORS

Clinton County, Iowa

SUBJECT: Use of County Roads for Special Events

I. Policy/Purpose

The Clinton County Board of Supervisors has determined that a policy and procedure should be established for individuals, governmental agencies and independent sponsors to follow in order to receive approval to utilize secondary roads for special events.

II. Scope

This policy pertains to secondary road Rights-of-Way (ROW) that are established within Clinton County, Iowa but outside established city limits and Iowa Department of Transportation ROW.

III. Objectives

From time to time special consideration for use outside the normal and ordinary use of county roads in connection with a planned event or activity is requested. This policy attempts to provide for timely and appropriate review for approval of these requests.

IV. Definitions

1. Traveled Way: Designated driving surface of a road (including the shoulder).
2. Roadside: Areas within the ROW that are outside the Traveled Way.
3. Clear Zone: A distance of ten feet from the outside edge of the shoulder away from the road.
4. ROW: Property obtained through deed or permanent easement reserved for construction of and/or maintenance of transportation facilities (typically 66-foot wide on most county roads).
5. IDOT: Iowa Department of Transportation

V. Procedure

A Secondary Road Use Request Form shall be completed by the sponsor outlining the type of event and its intended use of particular Secondary Roads.

The Secondary Roads Use Request form shall be evaluated by the following departments and approved and a resolution of the Board of Supervisors shall be passed prior to the event. The Secondary Road Use Request Form shall be filed with the Clinton County Engineer's Office.

The Office of the Clinton County Engineer shall evaluate the proposed request for compatibility with public travel on a Secondary Road. A recommendation shall be made upon restrictions required, signing required and whether road closure is required. Signs may be placed by the Office of the Clinton County Engineer or by the Applicant if a traffic control plan has been approved by the Engineer's Office for the event. The estimate of signing cost for the activity shall be paid by the sponsor prior to the event. The Board of Supervisors may waive the traffic control fee for governmental agency requests.

The Office of the Clinton County Sheriff shall evaluate the proposed request for need of law enforcement assistance. The estimated cost of traffic or law enforcement assistance shall be paid by the sponsor prior to the event.

The Office of the Clinton County Auditor shall evaluate the proposed request for conformance with the following requirements. The sponsor of the event shall provide a certificate of insurance naming Clinton County as an additional insured party. The Auditor's Office shall establish the insurance policy limits required for the event. The Sponsor shall submit a copy of signed Participant Waiver of Responsibility forms that releases the County and the sponsoring group that shows the participant assumes risk for the activity taking place on the Secondary Roads. The said release forms shall contain a valid signature and address and shall be kept in the possession of the sponsoring group.

Secondary Road Use Request Form

Name of Sponsor Authorized Representative: _____

Name of Event Sponsor: _____

Date of Event: _____

Description of Event and Roads to be Used: _____

Traffic Control (Circle One): Provided By Clinton County Provided by Applicant

If traffic control is requested to be provided by Clinton County an estimate of cost will be prepared and the fee paid prior to the event occurrence. If the traffic control is to be provided by the Applicant a traffic control plan must be submitted by the applicant with this form. The traffic control plan must be in compliance with the Manual on Uniform Traffic Control Devices (2003 Edition). The traffic control plan must be approved in writing by the Clinton County Engineer's Office prior to the event occurrence.

Certificate of Insurance Naming Clinton County as Additional Insured Enclosed _____

Signed Participant Waiver of Responsibility Forms Enclosed _____