



# City of Coquitlam Filming Road Use Permit Request

**Traffic Operations Division**  
3000 Guildford Way, Coquitlam BC V3B 7N2  
Phone: 604-927-6250  
Email: [trafficoperations@coquitlam.ca](mailto:trafficoperations@coquitlam.ca)

Submit to the Traffic Operations Division a minimum of 5 business days prior to the intended closure date.

**Permit Fee - \$75.00, \$100 if application is received less than 5 business days before the start of the proposed event.**

Application Date: \_\_\_\_\_

Film Permit Number \_\_\_\_\_

## Contact Information

Company Name: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Name of Contractor doing work for Company/Applicant: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

24 Hour Emergency Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Location, date and time, and traffic control plan information

I request approval to close (check all that apply): Direction:  Northbound  Southbound  Eastbound  Westbound

Curb/Outside Lane  Centre/Inside Lane  Right Turn Lane  Left Turn Lane  Cycling Lane  Sidewalk

Single Lane Alternating Traffic  Full Closure

Road/Street Name: \_\_\_\_\_

Location Description: \_\_\_\_\_

Date & Time Information: Dates: \_\_\_\_\_

*Starting*

*Ending*

Hours: \_\_\_\_\_

*Starting*

*Ending*

Purpose: \_\_\_\_\_

**Will this closure disrupt:** Bus Routes or Stops?  Yes  No If yes, the Applicant will need to contact Coast Mountain Bus Company regarding disruptions. Contact information is on page 2.

**Will this closure disrupt:** Garbage/Recycling Routes or Pick Up?  Yes  No If yes, the Applicant will need to assist the contractor and/or contact the City's Environmental Services Group. Contact information is on page 2. For the collection schedule see [coquitlam.ca/trashtalk](http://coquitlam.ca/trashtalk).

**Traffic Control Plan:**

(a) Traffic Management Manual for Work on Roadways Figure Number \_\_\_\_\_,

OR

(b) A traffic control plan (*attach separately*) indicating signage, taper lengths, direction of traffic, work area, and north arrow

**Traffic control persons (flag persons) on duty?**  Yes  No If yes, specify how many: \_\_\_\_\_

**All operations within the road right-of-way must comply with Worksafe BC regulations and the BC Ministry of Transportation and Infrastructure [Traffic Management Manual for Work on Roadways](#).**

**Application Checklist**

- Permit Fee
- Prime Contractor Designation Letter
- City of Coquitlam Certificate of Insurance
- Traffic Control Plan or Traffic Management Manual for Work on Roadways Figure Number
- Coast Mountain Bus Company (Phone: 778-593-5774 | Email: [special.events@coastmountainbus.com](mailto:special.events@coastmountainbus.com)) contacted regarding impact to bus routes and bus stops
- City of Coquitlam Environmental Services Group (Phone: 604-927-3500| Email: [wastereduction@coquitlam.ca](mailto:wastereduction@coquitlam.ca) contacted regarding impact to garbage/recycling routes and pick up

**I HEREBY AGREE** to the terms stipulated herein and further agree to indemnify and save harmless the City against any and all claims, actions, or expenses whatsoever or by whomsoever brought against the City by the reason of the City granting us this Road and Sidewalk Closure Permit. I further agree to accept responsibility to ensure proper situation control and street sweeping for the duration of the road or sidewalk obstruction.

\_\_\_\_\_  
Date Applicant Signature

**Office Use Only - PERMIT STATUS**

- Permit Fee  Prime Contractor Letter  Certificate of Insurance
- Traffic Control Plan  Impact to bus service  Impact garbage and recycling collection

Request is denied for the following reason(s): \_\_\_\_\_

Request is approved with the following change(s): \_\_\_\_\_

Request is approved as submitted

\_\_\_\_\_  
Date Traffic Technologist or Designate