



**PUBLIC WORKS DEPARTMENT**

988 County Road 10      Tel: (705) 932-9323  
Millbrook, Ontario      Fax: (705) 932-3458  
LOA 1G0

[www.cavanmonaghan.net](http://www.cavanmonaghan.net)

## Application For Temporary/Permanent Use Of A Road Allowance

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

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Numbers: Business \_\_\_\_\_ Cell: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Nature of Use: \_\_\_\_\_

Is Lane Closure Required? \_\_\_\_\_

Location of Use: (address) \_\_\_\_\_  
(Attach sketch/plan if necessary)

Period of Use: From \_\_\_\_\_ To: \_\_\_\_\_

In Consideration of Permission from the Township of Cavan Monaghan to use the above-noted road allowance for the specified purpose, the Applicant hereby agrees to repair any injury or damage done to the pavement, curbs, sodding, trees, sidewalks, or any other property situated on the said road allowance, by reason of such use, at the expense of the Applicant and to the satisfaction of the Director of Roads & Environmental Services/Engineer.

The Applicant also covenants and agrees to indemnify and save harmless the Township of Cavan Monaghan from any claim, liability or lawsuit on behalf of the Applicant or any third party, arising by reason of the Applicant's use of the road allowance. The Applicant acknowledges the Township of Cavan Monaghan may revoke any such permission forthwith upon written notice to the Applicant.

**Dated at the Township of Cavan Monaghan, Ontario**  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Signature of Director of Public Works: \_\_\_\_\_

**Note: Applicant must furnish a satisfactory Certificate of Insurance, showing third party liability coverage in the amount of \$5,000,000 with the Township of Cavan Monaghan as an additional named insured and containing a cross liability clause.**