



ARIZONA DEPARTMENT OF TRANSPORTATION
SPECIAL EVENT PERMIT APPLICATION

Globe District Office
P.O. Box 2717
Globe, Arizona 85502

Application is made by the undersigned to enter upon the highway right-of-way for the following special event:

on Highway(s) Beginning MP End MP In or near
on the following date(s) Start Time End Time
Applicant Name Title Phone
Organization Mailing Address
City State Zip Email

A Certificate of Insurance in accordance with the ADOT Permits Insurance Matrix, naming the State of Arizona and the Arizona Department of Transportation as additional insureds as their interest may appear, is a requirement of this permit and is attached herein and made part of the application. Such insurance shall be kept in force by the permittee for the term of the permit.

Permittee assumes all legal liability and financial responsibility for the event for the duration of the event, including indemnify, defend, and save harmless ADOT and the State of Arizona and any of its agents, directors, officers, employees from and against any and all claims, demands, suits, actions, proceedings, loss, costs, damages of every kind, or expenses, including court costs, reasonable attorney's fees and/or litigation expenses, and costs of claim processing and investigation, arising out of bodily injury or death of any person, or tangible or intangible property damage, caused, or alleged to be caused, in whole or in part, by the negligent or willful acts, or omissions of the Permittee, any of its directors, officers, agents, employees, volunteers, its contractors, subcontractors, vendors, or other entities being utilized for an event pursuant to a permit. This indemnity includes any claim or amount arising out of or recovered under the Workers' Compensation Law or arising out of the permittees failure to conform to any federal, state or local law, statute, ordinance, rule, regulation or court decree. Permittee agrees to provide ADOT with a certificate(s) of insurance consistent with the requirements stated in the ADOT Permit Insurance Matrix. Permittee is also obligated to provide certificates for its contractor(s) and vendors, or other entities being utilized if any. The required insurance shall be kept in force by the permittee and its contractor(s), vendors, or other entities being utilized for the term of the permit and shall not expire, be cancelled or materially changed to affect coverage available to the State without thirty (30) days written notice to the State. Automobile and worker's compensation coverage requirements are dependent upon the use of employees and autos for the event. Please refer to the Matrix to determine requirements for coverage, limits, language and other insurance related items specific to each permit. ADOT reserves the right to require an increase or allow a decrease in insurance limits or coverage based on the risks and financial exposure arising out of the event or activity proposed in the permit application. This application and subsequent permit are subject to review by the Arizona Department of Administration, Risk Management Division.

THIS PERMIT IS SUBJECT TO REVIEW BY THE ARIZONA DEPARTMENT OF ADMINISTRATION, RISK MANAGEMENT DIVISION.

Applicant Signature Date

FOR DEPARTMENT USE ONLY:

Permit No.

This application is approved with the following directions, requirements, specifications, restrictions:

ADOT APPROVED BY:

TERMS ACCEPTED BY:

(Title) (Date)

(Title) (Date)

(Title) (Date)

(Title) (Date)