



# Derby Police Department

125 Water Street  
Derby, Connecticut 06418  
Tel. (203) 735-7811  
Fax (203) 736-1499



## Traffic Authority Street Use Permit Application

Applicant: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Date: \_\_\_\_\_

*I am requesting that the Derby Police Department investigate the above request. I understand that I will be notified regarding the outcome of my request within approximately sixty working days.*

Signature: \_\_\_\_\_

Location of Activity:

\_\_\_\_\_  
\_\_\_\_\_

Description of Activity: (If necessary, attach sketch)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated Activity Period: \_\_\_\_\_ Day(s) Start Date: \_\_\_\_\_

Anticipated Attendance: \_\_\_\_\_

City of Derby  
Legal Traffic Authority

**\*\*\*FOR DPD USE ONLY\*\*\***

State Highway(s):

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Local Roads:

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Effect on State Highway(s):

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Traffic Control Measures Required:

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Detour(s):

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Recommendation:

Approve  Deny Reason: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Legal Traffic Authority

Comments: \_\_\_\_\_

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Date of Review: \_\_\_\_\_ Application Approval: Yes  No

Name: \_\_\_\_\_ Signature \_\_\_\_\_

City of Derby  
Certificates of Insurance Requirements  
(minimum requirements)

1. General liability, within a minimum limit of \$1,000,000 combined single limit per occurrence for bodily injury and property damage. Coverage shall include but not limited to operations liability, products liability, and completed operations and contractual liability, which insures the indemnity contained in this agreement.
2. Automobile liability insurance if vehicles are utilized in the activity. Minimum limit of liability is \$1,000,000 combined single limit of liability per occurrence for bodily injury and property damage.
3. Workers' Compensation coverage, if applicable, which complies with the Workers' Compensation regulations and Statutes of the State of Connecticut.
4. Employer's liability insurance, if applicable.
5. Professional liability insurance, with a minimum limit liability of \$1,000,000 per claim or accident. This coverage is required of businesses, associations, and other similar entities which have a professional component to their activities, e.g., architects, engineers, accountants, etc.
6. The City of Derby, the Board of Education (for school-related activities and activities which take place on school grounds) and their employees, agents, and officers designated as additional insureds under all liability policies except professional liability.
7. All insurance required hereunder shall contain provisions requiring thirty (30) days prior written notice of cancellation, termination or material change in coverage terms and conditions.