

RESOLUTION NO. 93 - 135

**A RESOLUTION OF ST. JOHNS COUNTY, FLORIDA AUTHORIZING  
THE COUNTY ADMINISTRATOR TO TEMPORARILY CLOSE COUNTY  
ROADS FOR PUBLIC GOOD AND ENJOYMENT**

**WHEREAS**, the Board of County Commissioners desires to promote various activities in St. Johns County for the public good and enjoyment, and

**WHEREAS**, such activities may include but are not limited to parades, street dances, bicycle races, running races, walking races, and charitable walkathons, and

**WHEREAS**, the County shall require any sponsoring organization to provide adequate liability insurance, traffic control measures, and other such safety measures the County may deem necessary, and

**WHEREAS**, such activities may from time-to-time require County roads to be temporarily closed or certain lanes of traffic thereof to be temporarily closed, and

**WHEREAS**, the County shall require that any such activity or event requiring temporary road closings be approved in advance by the County Administrator.

**NOW, THEREFORE, BE IT RESOLVED** by the Board of County Commissioners of St. Johns County, Florida, that the Board of County Commissioners hereby authorizes the County Administrator to temporarily close public streets, or roads, or portions thereof after determining the closure is for public good or enjoyment after the applicant provides and demonstrates the following:

1. A complete application, in substantially the form of Exhibit A.
2. Proof of liability insurance to the County showing that the County is insured for a minimum of \$5 million for any liability that the County may incur by reason of the event and/or the closing of the road.

3. Map of area affected.
4. Proper traffic control measures by an approved Maintenance of Traffic (MOT) Plan.
5. Any other information requested by the County Administrator.

**PASSED AND ADOPTED** this 24th day of August, A.D. 1993.

BOARD OF COUNTY COMMISSIONERS  
OF ST. JOHNS COUNTY, FLORIDA

BY: Laura Balsavage  
Its Chair

ATTEST: CARL "BUD" MARKEL, CLERK

BY: Jeanne Carter  
Deputy Clerk



EXHIBIT A



**ST. JOHNS COUNTY  
REQUEST FOR TEMPORARY CLOSING OF ST. JOHNS COUNTY ROAD**

NAME OF ORGANIZATION		PERSON IN CHARGE		DATE
ADDRESS OF ORGANIZATION				TELEPHONE NUMBER
TITLE OF EVENT				
DATE OF EVENT	STARTING TIME OF EVENT (Including Setting up Barriers, etc.)	DURATION OF EVENT (APPROX.)	ACTUAL CLOSING TIME (Including Taking Down of Barriers, etc.)	
PROPOSED ROUTE (INCLUDE ALL COUNTY AND STATE ROAD NUMBERS, SPECIFIC LOCATION, ETC.-INCLUDE MAPS)				
DETOUR ROUTE (INCLUDE ALTERNATIVE ROUTES-INCLUDE MAPS)				
NAME OF DEPARTMENT RESPONSIBLE FOR TRAFFIC CONTROL, ETC. (CITY POLICE, SHERIFF'S DEPT., FLORIDA HWY. PATROL, ETC.) (INCLUDE PRECINCT NO.)				
DESCRIPTION OF EVENT AND PURPOSE (MAY ATTACH LETTER)				
TYPED NAME AND TITLE (INCLUDE BADGE NO. IF APPROPRIATE)		SIGNATURE OF CHIEF OF LAW ENFORCEMENT AGENCY		DATE SIGNED
TYPED NAME AND TITLE OF COUNTY OFFICIAL		SIGNATURE OF COUNTY OFFICIAL		DATE SIGNED