Instructions

You have to take the forms down to city hall. Have the public works on the 6th floor sign off first. Then take the forms up to the planning department on the 11th floor and they will issue the permit. Please contact the city at 444-5220 (FAX# 444-5248) if you have any questions. The maximum time for a permit is 30 days, so leave enough time on your application in case your plans change. Below is a street permit obstruction acknowledgement that we need to have sent back before we can deliver your PODS container. Send the acknowledgement to driver@podsomaha.com with street permit in the subject line.

Street Obstruction Acknowledgement

As a customer of Portable Storage of Nebraska, LLC, DBA PODS, I understand that if I have requested street placement or intend to block a city sidewalk, then I have obtained the appropriate Street Obstruction Permit from the City of Omaha.

I also agree and understand that if I have not obtained the appropriate permit, I will be responsible for any financial damages Portable Storage of Nebraska, LLC, DBA PODS incurs in the form of towing fees, fines from the City of Omaha, or any other damages associated with not obtaining such permit.

Customer Signature ________________  Date __________

Printed Name ________________________________
City of Omaha
APPLICATION FOR
STREET OBSTRUCTION PERMIT

Name of applicant__________________________________________Date__________________

Address of applicant________________________________________

City________________________________State_________Zip_________

Phone Number_________________________________________Fax Number_________

Location of Obstruction (address # and location)______________________________

Duration of Obstruction: From__________________ To__________________

1. Attach a site plan or drawing showing the location of the proposed obstruction with dimensions to nearest property line, curb and street corner. Dimension the obstruction area.

2. Submit proof of insurance as described below:

Section 43-153. Insurance
(a) Any person or agent needing a permit for use of the public way as defined in this article, shall, before he is granted a permit, place on file with the permits and inspections division proof of insurance and a signed indemnity agreement as described in subsections (b) and (c) of this section.

(b) The applicant shall procure and maintain in effect insurance policies including the following coverages:
(1) Commercial general liability insurance, including contractual liability insurance with a limit of at least $500,000.00 per occurrence and a least $1,000,000.00 general annual aggregate limit; and
(2) Automobile liability insurance with a limit of at least $1,000,000.00 for each accident.

The insurance policies above shall be endorsed to name the City as an additional insured and to provide that the insurance company give thirty days prior written notice to the City in the event of cancellation or nonrenewal of such policy. Then a copy of the policy exclusions must be submitted with the insurance certificate. Proof of insurance shall be submitted directly to the City for review and approval.

(c) The applicant shall sign and provide to the City an indemnity agreement in approximately the following language:

"The undersigned, in consideration of the issuance, by The City of Omaha, a Nebraska municipal corporation ("City"), of a permit for use of a public way for building operations at the address stated below, agrees to defend, save, hold harmless and indemnify the City and its agents from all claims, damages, judgements, costs and expenses of any nature and description caused in whole or in part by or growing out of: (a) the undersigned’s use of public ways during the placing or failing to place any obstruction, barricade, material, equipment or apparatus of any nature in any street, highway, alley, sidewalk, space or thoroughfare, at an incident to or in connection with the said building operations, or (ii) any and all negligence on the part of the undersigned in the said building operations."

__________________________________________address of public way to be used

Approved (PUBLIC WORKS) BY: ______________________________DATE__________________

Approved (PLANNING DEPT) BY____________________________DATE__________________

Square footage of obstruction area____________________________________FEE____

PUBLIC WORKS: MAY 2005
CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFER NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
USI Insurance Services
521 Plymouth Road
Suite 112
Plymouth Meeting, PA 19462

CONTACT NAME
NAME:
Phone: (215) 925-7656
Fax: (215) 923-0342

INSRER(S) AFFORDING COVERAGE
INSRER A: AMCO Insurance Co.
19100
INSRER B: Allied Insurance Company of America
10127
INSRER C: Harleysville Insurance Company
23582
INSRER D:
INSRER E:
INSRER F:

COVERAGES

COVERAGE NUMBER: ACP 3037496582

POLICY NUMBER

POLICY EFF
1/1/2019
1/1/2020

POLICY EXP
1/1/2020
1/1/2020

LIMITS

COMMERCIAL GENERAL LIABILITY

EACH OCCURRENCE $1,000,000

CLAIMS MADE $100,000

MED EXP (Any one person) $5,000

PERSONAL & ADJ INJURY $1,000,000

GENERAL AGGREGATE $2,000,000

PRODUCTS COMPO & OCC $2,000,000

EBL AGGREGATE $2,000,000

AUTOPOIBLE LIABILITY

COMBINED SINGLE LIMIT $1,000,000

BODILY INJURY (Per person) $250,000

BODILY INJURY (Per accident) $250,000

PROPERTY DAMAGE (Per accident) $250,000

UMBRELLA LIABILITY

EACH OCCURRENCE $2,000,000

AGGREGATE $2,000,000

WORKERS COMPENSATION

F.L. EACH ACCIDENT $500,000

F.L. DISEASE - EA EMPLOYEE $500,000

F.L. DISEASE - POLICY LIMIT $500,000

INLAND MARINE

CIM0000021998X

1/1/2019
1/1/2020
See Remarks

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES: (ACORD 161, Additional Remarks Schedule, may be attached if more space is required)
All coverages are subject to policy terms, conditions and exclusions.

CERTIFICATE HOLDER
City of Omaha Public Works
1819 Farnam Street #600
Omaha, NE 68183

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

ACORD 25 (2016/03)
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