Road Closure Information Requirements (All lines must be filled out - "TBD" acceptable if unknown at time of filling out)	
Closed road name:	acceptable if driknown at time of fining out)
Closure starting point:	
Closure ending point:	
Local/business traffic permitted	
(Y/N):	
Start date (proposed):	
Start time (proposed):	
End date (proposed):	
End time (proposed):	
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Reason/scope of work:	
On site contact name/number:	
Justification letter attached (Y/N):	
Detour plan sheet(s) included	
(Y/N):	
Any other necessary MOT/plan	
sheets included (Y/N):	
Traffic Engineering Division	
review/approval date:	
Copy of ROW permit included	
(Y/N):	
ROW site meeting scheduled for:	
Planned dates for resident	
outreach:	
Residence outreach format	
(letters, door hangers, meeting,	
etc.):	
Example of resident outreach	
plan/documents included (Y/N):	
Planned dates for Changeable	
Message Sign (VMS) setup:	
Other/special notes:	
Closure will accommodate	
emergency vehicles in exigent	
circumstances(Y/N):	