STREET CLOSING REQUEST APPLICATION

Date: _____

To: Township Manager

From: _____

Subject: Request for Street Closing for Recreational or Civic Purposes

---

Request permission be granted to close _____

between _____ and

on _____, _____ between the hours of _____ and _____

for purpose of _____

_____

_____

Applicant Name: _____

Applicant Address: _____

Phone # (_____) _____ - _____ Cell Phone #: (_____) _____ - _____

Email Address: _____

_____

Signature of Applicant

Date: _____

To: _____

From: Township Manager

Subject: Request for Street Closing for Recreational or Civic Purposes

☐ Approved ☐ Disapproved

Please contact the Township Department of Public Works (610-398-0401) not later than 11:00 a.m. on _____ to arrange for delivery of barricades.

It is understood that placing and removal of the barricades will be the responsibility of the individual designated above. It is further agreed that the individual designated above is responsible for insuring cleanliness of the area after use.

_____

Township Manager

SOUTH WHITEHALL TOWNSHIP

NON PROFIT ORGANIZATION/GOVERNMENT AGENCY

Cones and Barricades Request Application

All applications for cones and barricades must be made to the Maintenance Superintendent.

Fax Number: 610-398-6898 Office Number: 610-398-0401

Seventy two hours notice is required. Permit will be issued upon approval of the traffic department. Traffic Control Fees: Traffic Control Devices – Rental, Delivery & Pick-up $75.00

********All street closings must be approved by traffic department**********

Applicant Name: _____ Phone: (_____) _____-_____

24 Hour Emergency Phone Number: (_____) _____ -_____

Applicant Address: _____

Location of Request: _____

Nearest Cross Street: _____

Date Needed By: _____

Reason for Request: _____

Is this Private Property: Yes ☐ No ☐

Is this a Dead End Street: Yes ☐ No ☐

PennDOT Approved Detour Required: Yes ☐ No ☐

TRAFFIC CONTROL MATERIALS REQUIRED:

Cones needed:	Yes ☐	No ☐	How many _____
Barricades needed:	Yes ☐	No ☐	How many _____
Road closed signs needed:	Yes ☐	No ☐	How many _____
No parking signs needed:	Yes ☐	No ☐	How many _____
Arrow signs needed:	Yes ☐	No ☐	How many _____
Detour signs needed:	Yes ☐	No ☐	How many _____
Road Closed Ahead signs needed:	Yes ☐	No ☐	How many _____

Public Works Department Use Only _____

Approved by: _____ Date: _____

Date Received: _____ Date Issued: _____

Expiration Date: _____ Permit #: _____ - _____