



Temporary Right of Way Closure Application

Received on: _____

APPLICATION #:

Five (5) BUSINESS DAYS REVIEW TIME REQUIRED (2 DAYS FOR NOTIFICATION PROCESS)

APPLICANT: _____ WORK PHONE: _____

ADDRESS: _____ FAX OR EMAIL: _____

CONTACT PERSON: _____ ADDRESS: _____

LOCATION OF CLOSURE: _____

PURPOSE OF CLOSURE: _____

START DATE: _____ END DATE: _____

NUMBER OF TRAVELED LANES CLOSED / DIVERTED: _____

NUMBER OF ON-STREET PARKING STALLS AFFECTED: _____

PORTION OF SIDEWALK WIDTH TO BE CLOSED: _____ FEET OUT OF _____ TOTAL FEET

Please provide a sketch on the back of the application of the proposed traffic control for your work or construction site. Include actual number, layout and location of all traffic control devices which must comply with the Federal Manual on Traffic Control Devices (M.U.T.C.D.) for size, type, placement and material quality and reflectivity. The City of Yakima does not have the devices to rent nor loan. **It is the applicant's responsibility to notify, on a daily basis, the City of Yakima Fire Department at 575-6060, the general public through the media and any adjacent or nearby property owners, businesses or residents affected in any way at all of the start and completion dates and hours of the closure/diversion per this application.**

The applicant must make sure that all required traffic control devices, including fully certified flagging personnel if needed, are in place before the work begins and are maintained for the duration of the closure/diversion. Special parking permits for the CBD area may be obtained from Customer Service in City Hall, 129 N 2nd Street, Yakima, 575-6080.

SIGNATURE OF APPLICANT: _____ DATE: _____

Office use only below this line

Application: Approved Disapproved Conditionally Approved

_____ Date _____ Date _____
Engineering Division Police Dept./Traffic Division

Comments/Conditions: _____

DISTRIBUTION:	<input type="checkbox"/> APPLICANT	<input type="checkbox"/> POLICE DEPARTMENT, TRAFFIC DIVISION
	<input type="checkbox"/> FIRE DEPARTMENT	<input type="checkbox"/> STREET DIVISION
	<input type="checkbox"/> TRANSIT DIVISION	<input type="checkbox"/> CUSTOMER SERVICE (IF IN CBD)