



**STREET CLOSING
APPLICATION
FEE \$5.00**

DATE _____
APPLICANT'S NAME _____ E-MAIL _____
APPLICANTS ADDRESS _____
BUSINESS NAME _____
TELEPHONE # _____ DRIVER'S LICENSE # _____
REASON THE STREET IS TO BE CLOSED _____
NAME OF STREET TO BE CLOSED _____
AREA OF STREET TO BE CLOSED _____
DATE OF STREET CLOSING _____
TIME OF STREET CLOSING _____ AM / PM TO _____ AM / PM

REQUIREMENT: SUBMIT DRAWING/SITE MAP SHOWING STREETS & PLACEMENT OF BARRICADES

TO REQUEST CITY BARRICADES/TRAFFIC CONES:

CONTACT THE PUBLIC WORKS DEPARTMENT AT (972) 919-2597.

FEE: \$60/HOUR PER CITY EMPLOYEE (MINIMUM 2 EMPLOYEES) FOR A MINIMUM OF 3 HOURS.

EXCEPTION: NATIONAL NIGHT OUT

PUBLIC WORKS APPROVAL
(IF APPLICABLE)

DATE

AFFIDAVIT

I, _____, AM REQUESTING THAT _____ STREET
BE CLOSED FOR THE FOLLOWING REASON, _____
_____, AND THAT THE RESIDENTS OR BUSINESSES ARE IN FAVOR OF THIS CLOSING, AND
THAT I WILL BE RESPONSIBLE FOR PLACING AND REMOVING BARRICADES AT THE TIMES STIPULATED.

APPLICANT'S SIGNATURE

*****OFFICE USE ONLY*****

RECEIVED BY _____ PH # _____ RECEIPT # _____
E-MAIL _____ FAX # _____

APPROVALS

POLICE DEPT. / TITLE DATE

Fax # (972) 247-0151

FIRE DEPT. / TITLE DATE

Fax # (972) 919-2675