Print Reset

PUBLIC WORKS DEPARMENT
ENGINEERING DIVISION
16000 North Civic Center Plaza
Surprise, Arizona 85374
Phone: 623-222-1734
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TRAFFIC CONTROL PLAN REVIEW FOR ROAD/SIDEWALK CLOSURES SUBMITTAL FORM TE-2

This form must be completed in full – Any portion not completed will lead to automatic rejection

Check One: ☐ First Review ☐ Re-submittal Submittal Date: _____

PLEASE PROVIDE THE FOLLOWING INFORMATION:

City of Surprise Permit Number: _____ Civil Inspector Name: _____

Type of Construction or Special Event: _____

Type of Closure: Arterial Road ☐ Collector Road ☐ Sidewalk ☐ Alley ☐

Number of Lanes to be Closed (*excluding turn lanes):* _____ Length of Sidewalk Closure: _____

Road or Sidewalk Requested to be Closed: _____

Starting Cross Street of Closure: _____ Ending Cross Street: _____

REQUESTED START DATE: _____ **END DATE:** _____

Traffic Control Company (Permittee): _____

Contact Name: _____

Email Address: _____

Office Phone Number: _____ FAX Number: _____

24 Hour Phone Number: _____ Mobile Number: _____

Contractor's Name: _____

Contact Name: _____

Email Address: _____

Office Phone Number: _____ FAX Number: _____

24 Hour Phone Number: _____ Mobile Number: _____

GENERAL NOTES:

1) All road closure submittals must be submitted twenty business days prior to the requested start date
2) Variable message boards are required to be in place ten days prior to the requested start date
3) A pre-construction meeting must be held prior to placement of the variable message boards
4) Police, Fire, schools and local businesses shall be notified and supplied with the contractor's contact information and a timeline of the closure
5) Information signs shall be placed containing the contractor's information as well as a hotline number sending **complaints** to the contractor, not the City

Lane/Sidewalk Rental Fee Schedule

Arterial Road	$125.00	per lane	per day	per 1/2 mile
Collector Road	$100.00	per lane	per day	per 1/2 mile
Sidewalk	$75.00		per day	per 1/4 mile
Alley	$75.00		per day	per block

_____	APPROVED	TOTAL PERMIT FEES:	_____
_____	APPROVED AS NOTED	REVIEWED:	_____
_____	REVISE AND RESBMIT	BY:	_____
_____	REJECTED, SEE NOTES	DATE:	_____

office use only