

Received by:

Permit Number:

STREET OBSTRUCTION NOTIFICATION

Company Name:			
Project Name (if applicable):			Today's Date:
Date(s) of Obstruction with start & end times:			
NOTE: clarify if impact is continuous or repeated. Writing "Oct 5 at 8 am – Oct 6 at 5 pm" means the road is impacted for 32 hours. Writing "Oct 5-6, each 8 am-5 pm" means the road is impacted each day for 9 hours.			
Location of Obstruction:			
Please include a general vicinity map.			
Please include your traffic control plan/map(s).			
Reason for Obstruction:			
What will you be impacting for public use? (Check all that apply)			
Sidewalk	Shoulder (no real impac	ct)	Driveways
Street Parking	1 Lane of travel		Full roadway
Contractor:			
On-site Contact:	Cell Number:		
Sub-contractor:			
On-site Contact:		Cell Number:	
PROCESS			
1. This notification must be submitted to the City of Sumner at least 2 business days prior to any work being done in the City's right-of-way. (The submittal date does not count as a day.) SMC 12.28.020			
2. Contact us for the following. Reference your permit #.			
When your obstruction is starting and completed.Any changes to time, date and/or location.			
With the information you supplied, we will schedule a pre-con if needed.			
APPLICANT HAS READ AND UNDERSTANDS THIS FORM & "CONDITIONS OF PERMIT"			
Signature of Applicant			
Please submit this completed application to permits@sumnerwa.gov.			
For Official Use			

Date: