



**CITY OF WILLIAMS
ROAD CLOSURE REQUEST
(not a permit)**

Applicant Name: _____

Address: _____

Person Responsible for Closure: _____ Phone: _____

Date(s) of Requested Closure: _____ Hours: _____

Reason for Closure: _____

Diagram of Road Closure Plan (include barricades and detour signage):

Name of Sign Provider (i.e.: Starlite Barricade, City): _____

For all closure requests, this form must be filled out in detail, approved by the Williams Police Dept. and forwarded to the City of Williams Planning and Public Works Departments for further approvals at least 48 hours in advance of requested closure time.

Special events closure requests require Council approval and must be scheduled by the City Clerk no later than ___/___/___ to be heard on the City Council agenda ___/___/___.

Roadways may not be closed until written authorization is received from the City. The City of Williams reserves the right to deny road closure requests.

CITY USE ONLY

Police: _____

Planning and Zoning: _____

Public Works: _____

Other: _____

City Clerk (for event closures): _____