



TEMPORARY ROAD CLOSURE PERMIT APPLICATION

Community Development Department
Building Division
455 Mountain Village Blvd.
Mountain Village, CO 81435
Office (970) 728-1392
Fax (970) 728-4342

CONTRACTOR/COMPANY INFORMATION

| | | |
|----------------------|-----------------|---------------|
| Company Name: | Address: | |
| Contact: | Email: | Phone: |

PROJECT INFORMATION

| | | |
|--------------------------|-------------|-----------------|
| Property Address: | Lot# | Permit#: |
|--------------------------|-------------|-----------------|

Reason For Road Closure:

Cannot be for commercial activities such as advertising or the sale of goods, ware, produce etc.

Valuation of Construction Materials: *(if no building permit is required by the Community Development Code REQUIRED: Copy of invoice/contract reflecting valuation). \$*

Street Name and Location of Requested Road Closure:

| | | |
|-------------------------|--------------|------------|
| Date of Closure: | Time: | to: |
|-------------------------|--------------|------------|

- Application must be filled out in its entirety and returned to the Community Development Department cd@mtnvillage.org
- Requests must be AT LEAST 24 hours in advance.
- Emergency closures will be considered but must be applied for prior to closure.
- ONE LANE SHALL REMAIN OPEN TO TRAFFIC.
- The above company or its representative shall provide its own traffic control and have the appropriate number of flagmen.
- It is the responsibility of the company listed above and its representative to notify affected residences and businesses of the road closure.
- This permit does not relieve the company or its representative from meeting any applicable requirements of law.
- Once properly validated below this document is your road closure permit.

Applicant Name: _____

Applicant Signature: _____ Date: _____

DEPARTMENT APPROVAL

Name: _____

Signature: _____ Date: _____