

Received on/by:

Date, initials



Application for a

TEMPORARY ROAD CLOSURE PERMIT

Applicant Name/Organization: Dripping Springs Lions Club

Contact Person: Sharon Goss

Address: 501 South Lariat Circle

City: Dripping Springs

State: TX

Zip Code: 78620

Phone Numbers: Office

Cell: 512-923-8630

Email Address: sgoss6@gmail.com

Street(s) to be

From	West end of Mercer starting at Bluff (intersection/block)	To	San Marcos	CLOSED	
From	Old Fitzhugh (intersection/block)	To	Mercer	CLOSED at Mercer to thru traffic (intersection/block)	
From	College (intersection/block)	To	Wallace (intersection/block)	To	Mercer CLOSED (intersection/block)
From	San Marcos (intersection/block)	From	Wallace (intersection/block)	To	Mercer Closed to thru traffic (intersection/block)

Requested date(s) and time(s) of closing:

From 6:30 am on 12/5/2020 to 8:00 pm on

12/5/2020 Reason for Closing: Christmas on Mercer

Event Location

The roads will need to be closed at 6:30 a.m. for event set-up. Event take-down will take place immediately following the tree lighting.

Date Application Submitted: _____

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STREET CLOSURE SUBMITTAL REQUIREMENTS

1. Temporary Street Closure Application
2. Detailed Engineered Traffic Control Plan
3. Notification to affected property owners, local Sherriff, Fire, and EMS, Dripping Springs Independent School District, Dripping Springs Water Supply Corporation, City of Dripping Springs Wastewater Operator, Pedernales Electric Cooperative, Verizon Wireless, Time Warner Cable, any other Utility Providers
4. Permit Fee of \$250.00
5. Proof of Liability Insurance Naming City as Additional Insured.
6. Approval of City Council

NOTICE: The Permit will become invalid on the expiration date noted on the permit. If an extension is necessary, the request, along with a Permit Extension Fee of \$100.00 must be submitted ten days prior to the expiration date or this permit will become invalid and a Stop Work Order may be placed on the project.

By signing below, I acknowledge that I have read through and met the above requirements for a complete submittal:

Applicant Signature

Date