



Marion County Board of County Commissioners

Office of the County Engineer

412 SE 25th Ave.
Ocala, FL 34471
Phone: 352-671-8686
Fax: 352-671-8687
permitting@marioncountyfl.org

LANE/ROAD CLOSURE REQUEST FORM

Lane Closure Road Closure

Requestor Information

Company/Owner Name:				Company/Owner Work Order/ID #	
Contact Person:			Email Address:		
Mailing Address:			City:	State:	Zip Code:
Telephone Number:			Extension:	Fax Number:	

Proposed Location of Closure

Parcel ID:		Section:	Township:	Range:
Physical Address or Roadway with Cross Streets:				
Directions to Site:				

Include with application: Location map with north arrow and all roads labeled, Temporary Traffic Control (TTC) Plan, and detour route (if applicable). TTC plans shall be provided for review and approval prior to work commencing in the right-of-way. TTC shall adhere to the FDOT Design Standards (<http://www.fdot.gov/design/standardplans/>) and/or Manual on Uniform Traffic Control Devices (MUTCD) (<http://mutcd.fhwa.dot.gov/>), as applicable. TTC Plans are formerly known as Maintenance of Traffic or MOT Plans.

Description of Closure

- Temporary** meaning motorists may experience closures (delays) for a set period of time.
 Intermittent meaning motorists may experience closures (delays) sporadically between periods of time.

Purpose:									
Dates:	From-		To-		Hours (daily):	From-		To-	

Incomplete request forms will be returned for corrections and/or additional information which may cause delays in the approval process. If a closure is projected to last for more than two (2) hours, 2 weeks advance notice is required.

Any work performed in Marion County's right-of-way requires a Right-of-Way Utilization Permit or a Construction Permit (through the Development Review process). Special Events also require permitting. If a permit of either type has already been applied, please select the type and enter the number below:

Right-of-Way Utilization Special Event or Construction Permit Permit/AR #: _____

I hereby agree that by signing of this form, no lane or road closure in association with this request will take place until proper authorization has been granted.

Print Name

Signature

Date