

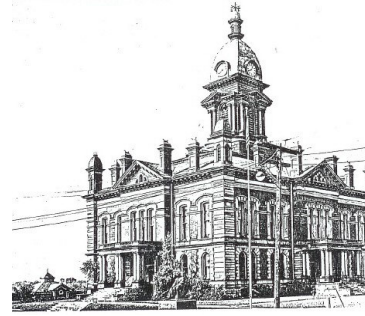
Wabash County Highway

800 Manchester Ave

Wabash, Indiana 46992

Phone (260) 563-0291

highway@wabashcounty.in.gov



Road Closure Request Form

Name: _____

Address: _____

Phone Number: _____

Location of Road Closure: _____

Justification for Road Closure: _____

Date of Initial Closure: _____

Duration of Closure: _____

The applicant will be responsible for proper signing of the road and assumes all liability with the closure until the roadway is re-opened. The applicant shall provide the highway department with a map detailing intended placement of signage with this application.

The applicant will notify Wabash County Central Dispatch and any school corporation affected by the closure prior to posting signage.

The Wabash County Highway will loan requested signage to the applicant. The applicant will be responsible for picking up the signage from 800 Manchester Avenue and will be required to return them to the same location. Applicant should call the highway department in advance to arrange pick-up and drop off.

Applicant Signature _____

Date Approved _____

Superintendent _____

Chairman of the Board of Commissioners _____