

Jay M. Jarvis, P.E.
Director

3000 Sheffield Road
Winter Haven, FL 33880



Board of County Commissioners

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ROADS & DRAINAGE DIVISION

Road Closure Request Form

Request Date:

Project Name:

Street Name:

Municipality:

Scope of Work:

Reason for Closure:

Closure Start Date:

Closure Duration:

Project Duration:

Office Contact Name:

Agency/Company:

Office Phone:

Jobsite Contact Name:

Agency/Company:

Mobile Phone:

Notes:

- Road closures are only granted when no other option exists and for the shortest time required to finish the indicated scope of work. Reason(s) for road closure must be specific and justifiable.
- Request must be returned at least 10 working days prior to closure start date.
- Submit form with a locator map and traffic control plan to: TE_RoadClosureCoordinator@polk-county.net
- Polk County will notify first-responder agencies and other appropriate authorities.

Reviewed by:

Approved by:

Joe Montoya, P.E., Engineering Manager

Jay M. Jarvis, P.E., Division Director

Date:

Date:

Amy J. Gregory, P.E., Traffic Manager

Ryan Taylor, Deputy County Manager

Date:

Date: