



City of Monroe Lane/Road Closure Request Form

Please complete the information below if your ROWD Permit has already been approved and paid for. If you have any questions regarding the permitting process please contact Jesse Lether at 360-863-4527 or jlether@monroewa.gov.

All information below must be filled out and sent to roads@monroewa.gov at least **2 full business days prior** to the Lane/Road Closure for posting. Request forms are accepted Monday-Thursdays only. Permit approval is required prior to submitting a Lane/Road Closure Request form.

Point of Contact Information

Company Name: _____ Telephone: _____
Contact Name: _____ Email Address: _____

Closure Request

Application #: _____ Permit #: _____
Road: _____
Date of Closure: _____
Start Time of Closure: _____ End Time of Closure: _____
At/Between: _____
Check All That Apply: <input type="checkbox"/> Lane Closure <input type="checkbox"/> Road Closure <input type="checkbox"/> Sidewalk Closure <input type="checkbox"/> Shoulder Closure <input type="checkbox"/> Lane Shift <input type="checkbox"/> Flaggers <input type="checkbox"/> Detour (please include map)
Type (Ex: Closure of the southbound lane): _____
Project/Work Description: _____ _____ _____