

**APPLICATION FOR PERMISSION TO DETOUR ROAD TRAFFIC  
Town of Farmington, Washington County**

<b>Submit completed application to:</b> Patty Hoerig, Town Clerk 1807 County Road A, West Bend, WI 53090	<b>Application to be approved by Town Board at a Town Board meeting. To be on agenda, must submit application by 1st Tuesday of the month.</b>
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Date of Application: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Reason for detour: \_\_\_\_\_

Name of road to be closed: \_\_\_\_\_

Road closed from: \_\_\_\_\_ Road closed to: \_\_\_\_\_

Date & time of closure: \_\_\_\_\_

Proposed temporary route: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**The above hereby requests permission to close the marked route as described, during which time they will provide a temporary route for highway/road traffic as designated in this application. They agree to and will abide by the conditions listed below, which is made by the undersigned official under proper authority to act in behalf of the represented above.**

Signature of Authorized Individual \_\_\_\_\_ Title \_\_\_\_\_

**Permission is hereby granted to temporarily close a highway/road route and to provide a detour. Therefore, by signing or policing or both as set forth in this application, subject to the conditions stated below.**

**Conditions:** \_\_\_\_\_

Approved by (Town Chairman) \_\_\_\_\_ Date \_\_\_\_\_