

# TEMPORARY WALKWAY

Permit # \_\_\_\_\_

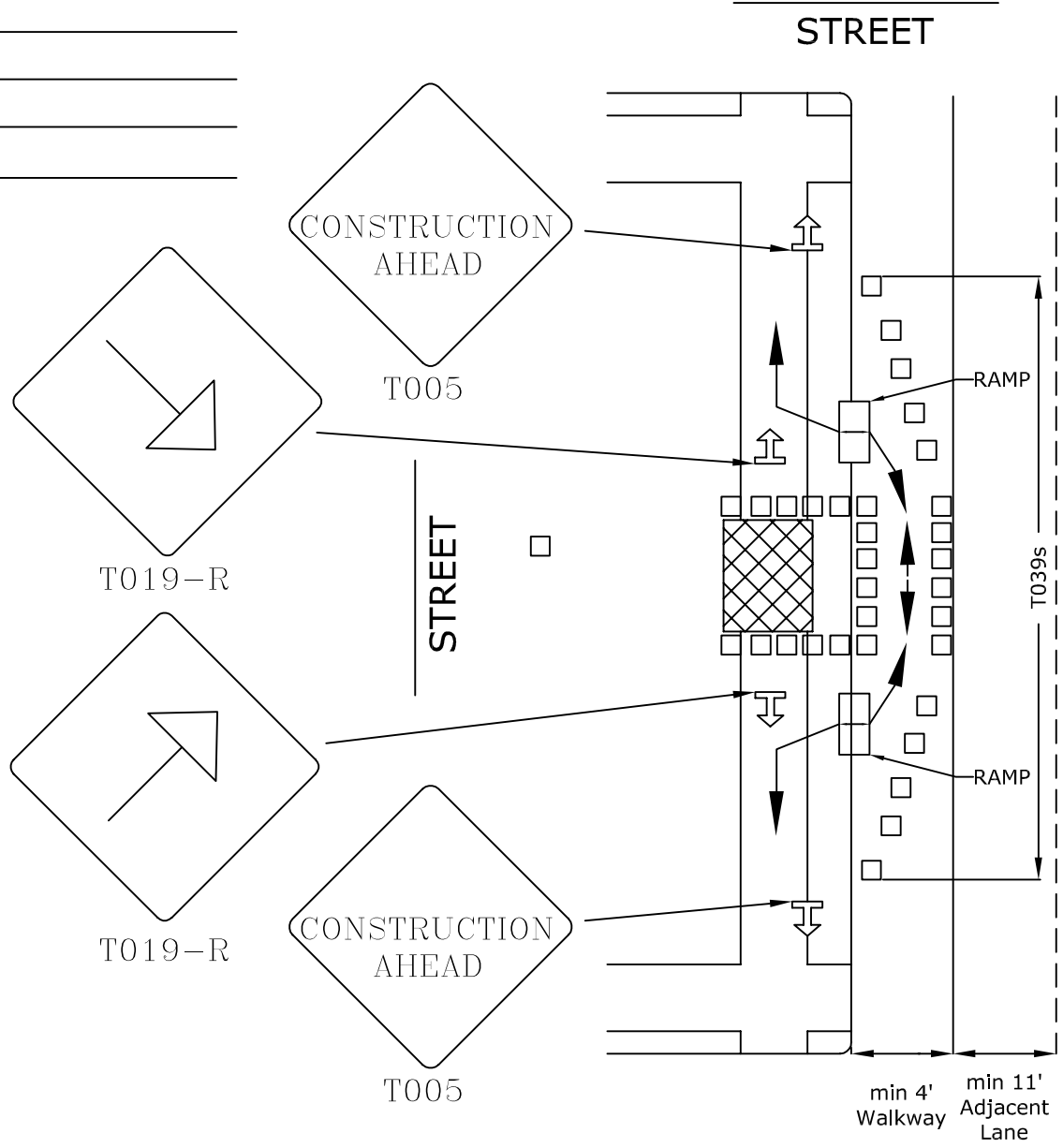
Name: \_\_\_\_\_

Contact #: \_\_\_\_\_

Site Address: \_\_\_\_\_

Type of Work: \_\_\_\_\_

Hours of Work: \_\_\_\_\_



NOTE: FULL SIDEWALK CLOSURES MAY REQUIRE FLAGGER W/ SIGNING PER COS TRAFFIC CONTROL MANUAL

PEDESTRIAN CONTROL

INDICATE NORTH