Application for Traffic Street\Lane\Sidewalk Occupancy Permit

Closed New Year's & Martin L King Days; Lincoln's & Washington's birthdays; Good Friday; Memorial, Independence, Labor, Columbus, Election & Veterans' Days; Thanksgiving; Black Friday; Christmas

Engineering, Traffic & Transportation
Phone 201.547.4470

13 East Linden Av, Jersey City NJ 07305
Email monte@jcnj.org & mdoyle@jcnj.org

Street: _____ Address(es) #(s) _____

Cross streets: _____ to _____

Reason: _____

Begins: _____ _____ | ____ ends: _____ _____ | ____
time month date time month date

How far into the street are you going? _____ ft: how far along the curb are you going? _____ ft
Please check where appropriate:

[ ] PREVIOUS TRAFFIC PERMIT ISSUED.....WHAT # _____?
[ ] ENGINEERING PERMIT ISSUED.....WHAT # _____?
[ ] OVERNIGHT WORK
[ ] ENTIRE BLOCK CLOSED WITH LOCAL TRAFFIC MAINTAINED
[ ] CURB LANE/PARKING TO BE PROHIBITED ON circle NORTH SOUTH EAST WEST SIDE(S)

EMERGENCY - NO PARKING SIGN posted by Parking Enforcement @ 394 Central Av must be filed three (3) City business days prior to start of job. Signs $10 each (minimum 2) for 5 day intervals; meter bags $20 per day per meter. Payment must be made in person with Discover/MC/Visa or debit cards, or money order - no cash or checks. **If not removed upon job finish, removal fee is $5 per sign, charged to credit or debit card. I hereby acknowledge understanding of same.**

_____ **Applicant signature** _____ | ____ **date**

[ ] TRAVEL LANE WHERE NO PARKING circle NORTH, SOUTH, EAST, WEST SIDE(S)
[ ] PARTIAL SIDEWALK OCCUPANCY - 5 ft clearance maintained
[ ] COMPLETE SIDEWALK CLOSURE - get Zoning permit for driveway work if applicable
[ ] BULK MATERIAL WILL BE PLACED ON SIDEWALK
[ ] WITHIN 35 FT OF INTERSECTION - if signalized or stop sign blocked, hire off duty police
[ ] OFF DUTY POLICE WILL BE ONSITE
[ ] EXCAVATING NEAR SIGNALIZED INTERSECTION - obtain blueprints from Traffic

Applicant: _____ _____ | ____
Signature Month date

_____ _____
Print name Company

_____ _____ _____ _____
Street address City State Zip

Telephone # ( ) _____ - _____ Email_____