



PERMIT No. \_\_\_\_\_

# TOWN OF KIPLING

## TEMPORARY ROAD CLOSURE PERMIT APPLICATION

REQUESTING TO CLOSE  ROAD  OTHER

LOCATION OF CLOSURE: \_\_\_\_\_

PURPOSE OF CLOSURE: \_\_\_\_\_

DATE OF CLOSURE: \_\_\_\_\_

DATE OF CLOSURE: \_\_\_\_\_ AM/PM TO \_\_\_\_\_ AM/PM

ORGANIZATION NAME: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Civic Address: \_\_\_\_\_ P.O. Box # \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone No. Res: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_ Fax: \_\_\_\_\_

**Please highlight the blocks affected on the enclosed map.**

- 1. It is the Applicant's responsibility to call Town Maintenance (306) 736-9092 the preceding day for a confirmation reminder to have the barricades delivered.

\_\_\_\_\_  
Application Date

\_\_\_\_\_  
Applicant's Signature

### TEMPORARY ROAD CLOSURE PERMIT

**CONDITIONS OF APPROVAL:** \_\_\_\_\_

FEE: \$ \_\_\_\_\_ DAMAGE DEPOSIT: \$ \_\_\_\_\_ TOTAL: \$ \_\_\_\_\_

DATE: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

COPIES OF PERMIT TO BE GIVEN TO:

Ambulance (Fax) 306-736 8407 (Gloria Kish)

Fire Chief Email: [kdnordal@sasktel.net](mailto:kdnordal@sasktel.net)

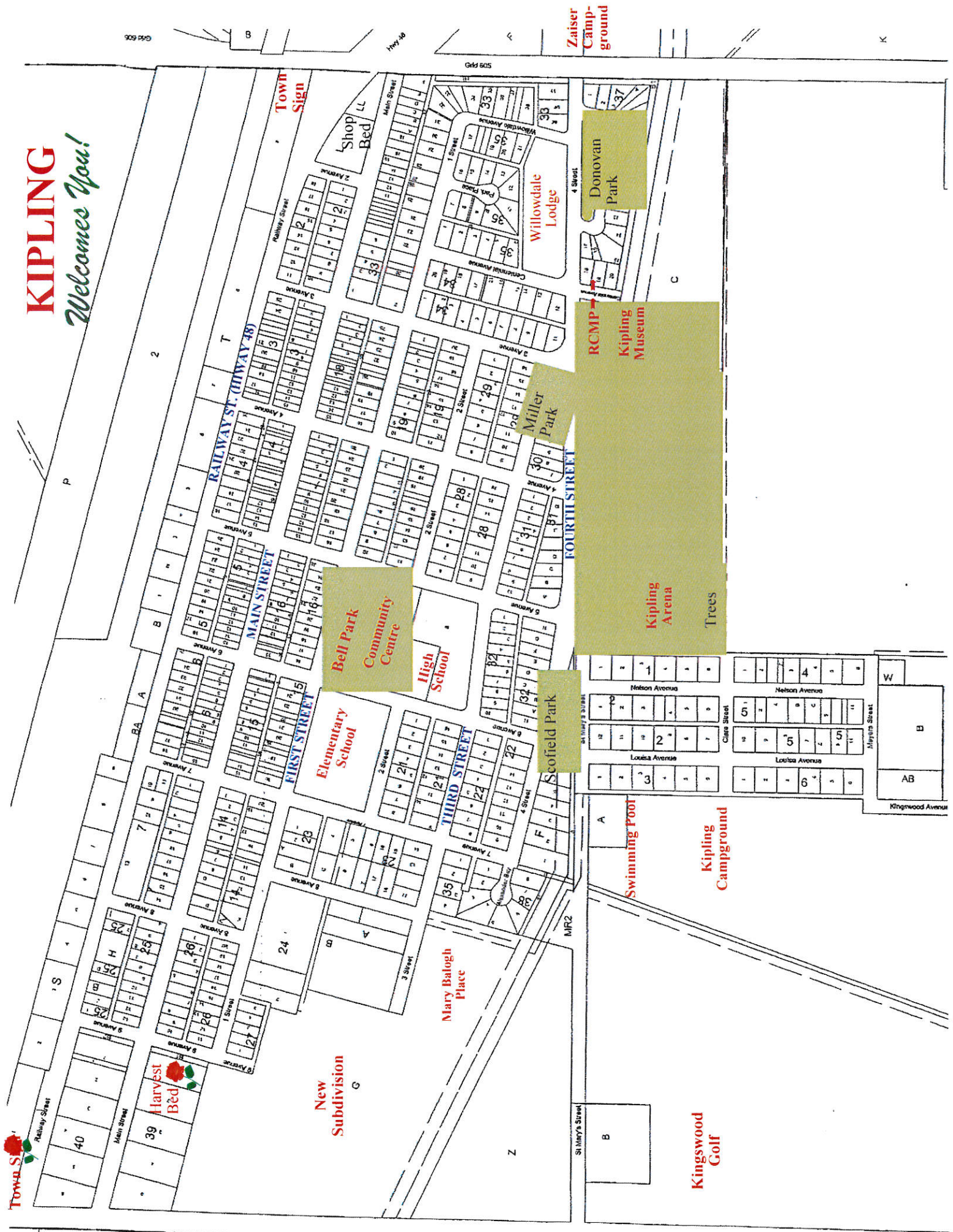
Applicant (Fax/Email/Mail)

R.C.M.P (Fax) 306 736 6402

Town Maintenance (Fax) 306 736 8448



**KIPLING**  
*Welcomes You!*



Zaiser  
Camp-  
ground

Town  
Sign

Willowdale  
Lodge

Donovan  
Park

RCMP  
Kipling  
Museum

Miller  
Park

Kipling  
Arena

Trees

Bell Park  
Community  
Centre

High  
School

Elementary  
School

Scotfield Park

Swimming Pool

Kipling  
Campground

Mary Balogh  
Place

New  
Subdivision

Harvest  
Bed

Kingswood  
Golf