



EAGAN

APPLICATION FOR TEMPORARY COVERING OF PARKING RESTRICTION SIGNS

Name of Street:

Sign Locations from:

To:

Reason for Covering:

Number of Signs to be Covered:

Side of Street: North South East West

Start Date of Covering:

End Date of Covering:

Beginning Time:

Ending Time:

Name:

Cell Phone:

Address:

E-mail:

Signature:

Date:

Return to: eaganstreets@cityofeagan.com

Application form must be electronically signed and completed by a resident or property manager affected by and responsible for the sign covering a minimum of 5 working days prior to the requested date to allow notification of various departments. A total of six applications for sign covering are permitted per calendar year.

Signs will need to be covered by the requestor. The use of black garbage bags or any other bags that will completely cover the signs are acceptable. After the end date is complete, it is up to the requestor to promptly remove all the sign coverings. Questions? Please contact our Central Maintenance Facility (651) 675-5300.

City Streets Dept Approval: _____ Date: _____

City Fire Dept Approval: _____ Date: _____

City Notes/Conditions of Approval: _____