

# TEMPORARY OBSTRUCTION OF PUBLIC PROPERTY

In addition to your application, the following is also required:

- Prior to submitting the Obstruction application to the Permit Office you must first obtain written approval from the City of Dearborn Traffic Safety Department located at 16099 Michigan Avenue.

Contact: Lt. Steven White at 313- 943 – 2275

Submit the attached application to the Lieutenant for approval on the signature section of application.

- Three copies of a site plan (1/16 inch = 1 foot OR 1 inch = 20 feet scale) shall be submitted showing the following:
  - . Location of building(s) on the lot(s)
  - . Proposed barricade(s) that will be used
  - . Any re-routing of vehicle or foot traffic necessitated by barricades

The following inspections are required for a Temporary Obstruction of Public Property Permit:

- #252 Inspection after set-up
- #253 Obstruction removed
- #242 Final inspection



**PERMIT AND PLAN REVIEW**  
16901 Michigan, Suite 6, Dearborn, MI 48126  
(313) 943-2442

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

Date \_\_\_\_\_

Staff Initial \_\_\_\_\_

## TEMPORARY OBSTRUCTION OF PUBLIC PROPERTY PERMIT

### Location and Description of Property

Address \_\_\_\_\_

Lot No. \_\_\_\_\_

Subdivision \_\_\_\_\_

### Nature of Project

\_\_\_\_\_  
\_\_\_\_\_

Type of Barricade(s) \_\_\_\_\_

Approximate dates that traffic will be diverted or blocked off on street, alley or sidewalk: \_\_\_\_\_

### **PROPERTY OWNER INFORMATION/AFFIDAVIT:**

I do hereby certify that I am the owner of the property herein described and that I have given the applicant herein named permission to perform the work described in this application:

Name of Property Owner \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Driver's License or State Identification Number \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

**Signature of Property Owner** \_\_\_\_\_

**APPLICANT INFORMATION/AFFIDAVIT:**

Application is hereby made for a permit for temporary obstruction of public property as described in this application and the accompanying drawings, which are a part of this application. The acceptance of the permit shall constitute an agreement to abide by all codes and ordinances enforced by the City of Dearborn.

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Driver's License or State Identification Number \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

**Signature of Applicant** \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public, Wayne County, Michigan

My commission expires \_\_\_\_\_

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**FOR OFFICE USE ONLY**

- Application complete
- 3 Sets of Drawings submitted

**Plan Reviewer** \_\_\_\_\_

**Date Approved** \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_

Processing Fee \$ \_\_\_\_\_

Plan Examination Fee \$ \_\_\_\_\_

**PAY THIS AMOUNT** \$ \_\_\_\_\_

**Traffic Safety Reviewer** \_\_\_\_\_

**Date Approved** \_\_\_\_\_

**Building Code Official (if req)** \_\_\_\_\_

**Date Approved** \_\_\_\_\_