



Traffic Control Permit (TCP) Multiple Location List

To: City of San Diego, Traffic Permit Section

Date: _____

From: (Company): _____

Phone No.: _____

Contact Person: _____

Email: _____

TYPE OF WORK
1 = Lane Closure
2 = Street Closure
3 = Sidewalk Closure
4 = Alley Closure
5 = Parking Lane
6 = Detour
7 = Trenching
8 = Flagging

Location	From	To	Start Date *	End Date *	Work Hours **	Thomas Bros.	Type of Work
<i>Sample Street</i>	<i>Example Street</i>	<i>Instance Street</i>	<i>1/12/1997</i>	<i>1/15/1997</i>	<i>8:30 A – 3:30 P</i>	<i>1289-A4</i>	<i>1,3, &5</i>

Comments:

All columns must be filled out for proper authorization

* Work Days: Monday Through Friday **Work Hours: 8:30 AM - 3:30 PM. Unless other hours are preapproved.
 No Work on Saturdays, Sundays, or Holidays Unless Approved and Noted In Comments
 Minimum of 5 working days required for construction work which affects traffic signal e-mail info to: jvaca@sandiego.gov