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|  Portable Changeable Message Sign Approval Form |
|  |  |  |  |  |  |  |  |  |  |  |
| **Title of DelDOT Contract or Event:** |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **Requester's Name:** |  |
| **Requester's Phone Number:** |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **24 Hour Emergency Contact Info:** | **Name** |  |  |  |  |  |  |  |  |  |
|  | **Phone No.** |  |  |  |  |  |  |  |  |  |
|  | **Cell Phone No.** |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **Start and End Date of Event:** |  |  |  |  |  |  |  |  |  |  |
| **Start and End Time of Event:** |  |  |  |  |  |  |  |  |  |  |
| **Location of Event - Town/City:** |  |  |  |  |  |  |  |  |  |
| **Number of Units Requested:** |  |  |  |  |  |  |  |  |  |
| **Specific Locations of Units Requested:** | **1.** |
|  | **2.** |
|  | **3.** |
| **Approved Messages: (8 Characters** |  |  |  |  |  |  |  |  |  |  |
| **per line max. - 3 Lines per Panel)** | **Unit #1 - Panel #1:** |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **Forms for construction, maintenance or special event activities can be emailed to:****Michael Rivera****Special Events Manager****Michael.Rivera@delaware.gov****169 Brick Store Landing Road****Smyrna, DE 19977****P: (302) 659-4080****F: (302) 653-2860****Forms for emergencies can be faxed or emailed to:****Transportation Management Center****tmc1@delaware.gov****169 Brick Store Landing Road****Smyrna, DE 19977****P: (302) 659-4600****F: (302) 659-6128** |  |  |  |  |  |  |  |  |  |  |
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|  | **Unit #1 - Panel #2:** |  |  |  |  |  |  |  |  |
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|  | **Unit #2 - Panel #1:** |  |  |  |  |  |  |  |  |
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|  |  | **Unit #2 - Panel #2:** |  |  |  |  |  |  |  |  |
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|  | **Unit #3 - Panel #1:** |  |  |  |  |  |  |  |  |
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|  | **Unit #3 - Panel #2:** |  |  |  |  |  |  |  |  |
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|  **Approved By:** |  | **Date:** |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **Additional Notes:** |  |
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