

**STRUCTURE and/or RESTRICTION of WIDTH  
CLOSING or REOPENING NOTICE**

**Regional/District Location Address:**

**Contract No. :**

**Project No. :**

**County:**

**Project No. :**

**Project Supervisor:**

**Phone No:**

**LANE CLOSURE:**

Date:

Route:

Log Mile:

**RESTRICTION:**

Horizontal:

Vertical:

**DESCRIPTION OF LOCATION AND MAP(ATTACHED):**

**RESTRICTION OR CLOSURE TERMINATED:**

**Date:**

**Send to:**

[Tdot.permitoffice@tn.gov](mailto:Tdot.permitoffice@tn.gov)

615-532-9289