

**EMERGENCY:**

STOP SIGN

TRAFFIC SIGNAL

FAILED PAVEMENT STRUCTURE

TREE ACROSS ROADWAY

**EMERGENCIES REQUIRE IMMEDIATE RESPONSE**

# SERVICE REQUEST

Date:

Time:

Property/Address:

Request of citizen:

---

**COMPLAINANT INFORMATION:**

Name:

Telephone#

Address:

City:

Zip Code:

---

Activity requested:

RDOT Staff member assigned:

---

**DESCRIPTION OF WORK PERFORMED BY RDOT MEMBER:**

Serviced by:

Prepared by:

Date/Time Received:

Date Completed:

Time Completed:

**Follow Up:**