

CONSTRUCTION STAGING AREA AND PARKING VEHICLE PERMIT APPLICATION (Appendix H)

University of Minnesota - Twin Cities

Parking & Transportation Services (PTS)

Contractor to complete form. U of M project manager to review, sign, and submit to PTS.

Submit to parking@umn.edu at least 2 weeks in advance of start date of permits or impacts.

Project Number: _____ Project Location: _____

Project Name and Description: _____

PROJECT
INFO

Contractor's Name & Company: _____

Phone Number: _____ Cell Number: _____ Email: _____

A map/drawing of all requested construction staging areas, parking areas, or dumpster sites **must** be attached.

VEHICLE
PERMITS

| | | | |
|--|--|--------------|--|
| Number of Vehicle Hang Tags Requested (required for all parked vehicles): | | | |
| Justification if >2: | | | |
| Beginning Date: | | Ending Date: | |
| Number of Dumpster Spaces or Lift Parking (specify which) Requested: | | | |
| Beginning Date: | | Ending Date: | |

PARKING
IMPACTS

If metered stalls are impacted, provide meter numbers: _____

If non-metered stalls are impacted, provide number, type and location: _____

Contractor must post "parking closed begins [date]" signs 3 days before a non-metered parking area closure.

TRAFFIC
IMPACTS

All impacts to roadway, driveway, bikeway, and sidewalk must be per MnMUTCD temporary traffic control requirements. All flaggers must be trained by a MnDOT certified flagger trainer. A traffic control plan must be attached for any roadway, driveway, bikeway, or sidewalk obstruction or traffic impact.

Are there traffic impacts associated with this request? If yes, describe below: YES NO

COORDINATION

Has University Landcare approved the site? YES N/A

If yes, who is the contact? _____

Has the appropriate University District approved the site? YES N/A

If yes, who is the contact? _____

Does the site impact non-University property or right of way? YES NO

If yes, the contractor must obtain any required permits from the appropriate jurisdiction(s).

University of Minnesota PM to sign after review and approval by Landcare and/or District as applicable.

PM
APPROVAL

U of M Project Manager (Name): _____

Signature: _____

PhoneNumber: _____ Cell Number: _____ Email: _____

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Submit to parking@umn.edu at least 2 weeks in advance of start date of permits or impacts.

PTS OFFICE USE ONLY: DO NOT WRITE IN THE SPACE BELOW

Date/names of approval by PTS: _____

Print on Vehicle Hangtag(s):

Location: _____

Project #: _____

Dates Valid: _____

PTS OFFICE USE

Number of Parking Hangtag Permits Issued: _____ x \$ _____ = \$ _____

Number of Dumpsters/Lifts: _____ x \$ _____ = \$ _____

Number of Metered Spaces Reserved: _____ x \$ _____ = \$ _____

Total Amount Due for Hangtag Permits, Meters, and Dumpster: _____ = \$ _____

Parking Hangtag Numbers Issued: _____

(fill in after hangtags issued) _____

End of Construction Staging Area and Parking Vehicle Permit Application