

TRANSPORTATION CLOSURE FORM (Streets, Sidewalks, Rike Paths & Rike Parking)

		(Streets, Sidewalks, Bike	Paths & Bike Parking)	
Date Subm	itted: 1	1/4/2024		
Street(s), Si	idewall	ks, Bike Path or Parking to be Closed: Entrance	ramp at South east corner of the latest Talbot addition	
Intersecting	g Stree	ts which are affected or define limits of closure:	Click or tap here to enter text.	
Reason for	Closur	re: Install new handrail brackets and patch ramp	o foundation wall	
Project On-Site Contact Person: Brad Bowling U of I Project Manager (PM): Jon Haselbring			Phone Number: 309.331.4530 U of I PM Phone Number: 217.474.3268	
Date of Clo	sure:	11/6/2024	Expected Time of Closure: 7 am	
Date of Re-	openin	g: 11/22/2024	Expected Time of Re-opening: 5:00 PM	
Work Order No. (if used): N/A			CDB Contract No.: N/A	
Is Traffic re-routing necessary? No			If so, who should be involved? N/A	
Will Pedestrian/bicycle traffic be affected? No			If so, will the sidewalk be closed? Yes	
Will ADA audible/visual warnings and barriers be provided? No			Will pedestrian traffic be routed safely? Yes	
Are additio	nal saf	ety precautions needed? No		
Please provi	ide a di	agram noting signage, re-routing, safety features, etc	c. with related explanations. Diagram required.	
Yes	No			
✓		Is barricading required? If so, indicate the barricate the F&S Service Office to submit a barricade ser	•	
	✓	Will Facility & Services staff place the barricades? If the barricades will be placed by others, give the name of person responsible and the telephone number: Click or tap here to enter text.		
	✓	Will police be necessary to direct the traffic? If so, name jurisdiction times, dates and location of each officer needed: Click or tap here to enter text.		
	✓	Will this street closure affect University of Illinois parking meters on the street or in the parking lots in this area? If so, you <u>MUST</u> contact the Parking Department at 333-3530 as there may be a fee assessed.		
	✓	Will MTD, DRES or other bus route re-locations be necessary? If so, coordinate with affected agency. Record name and date of discussion with agency representative: Click or tap here to enter text.		
	✓	Will deliveries be permitted? If so, how will access be controlled? Click or tap here to enter text.		
		Sarthak Prasi	ad	
Date appro	ved: 11	1/5/2024 Approved By: Sarthak Prasad on behal	f of Stacey DeLorenzo	
Transportation Systems Manager (TSM): Stacey Del orenzo : Phone: (217) 300-1750 : fandscampustdm@illinois.edu				

