

ROAD MAINTENANCE REQUEST FORM

Torrance County Road Department

Date: _____

Is this road a county recognized public road? Yes _____ No _____

If Yes, Road Number _____

If no, location _____

Subdivision name, if applicable: _____

Work requested: _____

Number of families using road? _____

Number of miles of road? _____

Is this a through road? Yes _____ No _____

Is this a school bus route? Yes _____ No _____

If the additional cost of this work had to be assessed to the property owners, would you object? Yes _____ No _____

Additional Comments: _____

Request made by: Name: _____

Address: _____

Phone Number: _____