



**Washington State
Department of Transportation**

Construction closure request form

Deadline: Please send this form to
2 p.m. on Monday

[@wsdot.wa.gov](mailto:wsdot@wsdot.wa.gov) by

Week 1:

Contract #

Project title and agency

Contact information:

Name, phone number and e-mail

Field contact:

Name, cell phone and e-mail

Construction zone

boundaries: Include SR
and/or street names

Direction: northbound,
eastbound, etc.

Which lanes: left, center, right

**Closing shoulders, bike
lanes, alleys or sidewalks?**

Closure dates

Closure hours

**Brief but specific
explanation of work that will
be performed during
closures.**



**Washington State
Department of Transportation**

Week 2:

Contract #

Project title and agency

Contact information:

Name, phone number and e-mail

Field contact:

Name, cell phone and e-mail

Construction zone

boundaries: Include SR
and/or street names

Direction: northbound,
eastbound, etc.

Which lanes: left, center, right .

**Closing shoulders, bike
lanes, alleys or sidewalks?**

Closure dates

Closure hours

**Brief but specific
explanation of work that will
be performed during
closures.**



**Washington State
Department of Transportation**

Week 3:

Contract #

Project title and agency

Contact information:

Name, phone number and e-mail

Field contact:

Name, cell phone and e-mail

Construction zone

boundaries: Include SR
and/or street names

Direction: northbound,
eastbound, etc.

Which lanes: left, center, right .

**Closing shoulders, bike
lanes, alleys or sidewalks?**

Closure dates

Closure hours

**Brief but specific
explanation of work that will
be performed during
closures.**