

COMMUNITY-LED TRAFFIC SAFETY APPLICATION FOR OBSTRUCTION PERMIT

Applicant Name	First:	Last:	
Contact Info	Phone:	Email:	
Home Address:			

Is a neighborhood church, school, community group, or business supporting your project? If so, provide their information below.

Project Sponsor	Name:		
Address:			
Contact Person	First:	Last:	
Contact Info	Phone:	Email:	

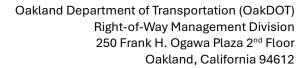
APPLICANT HAS READ AND ACKNOWLEDGES THE FOLLOWING:

- 1) Permit fee(s) owed per City of Oakland Master Fee Schedule.
- 2) To renew an OB permit, it must NOT have expired. Working without a valid OB permit is subject to stop work order, additional fees, penalties, and may result in renewal delays.
- 3) By signing below, applicant certifies that all information provided as part of this application is true and correct to the best of their knowledge.

Applicant Signature:	
Print Name:	
Date Signed:	

THIS BOX FOR OFFICE USE ONLY
THIS BOX FOR OFFICE USE CIVE!
Staff preparing OB Permit placards
Date applicant picked up placards
OB250

Submit this application form and other required materials to OakDOT at DOTOnlinePermits@OaklandCA.gov or by appointment at 250 Frank H. Ogawa Plaza, 2nd Floor 94612.





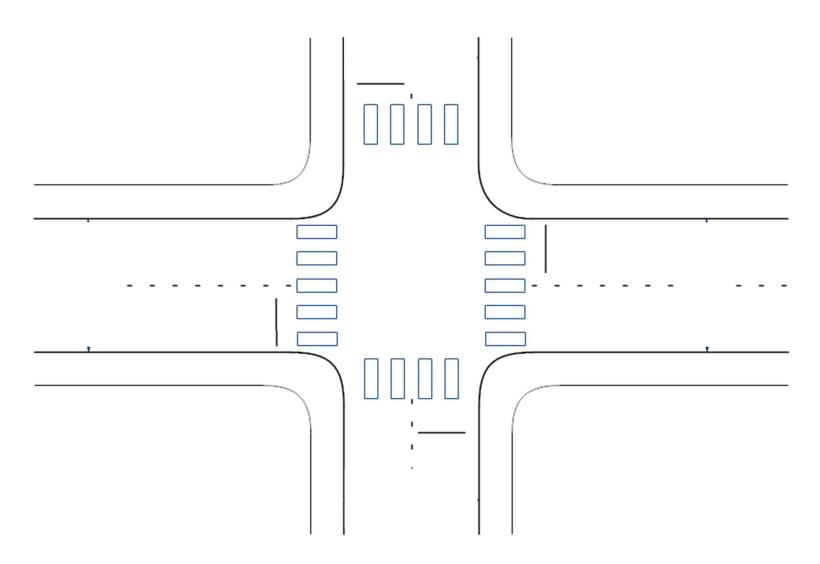
Tell us about the project you would like to see installed in your neighborhood.

What type of project is this? (check one)	
Curb Extension	
Daylighting intersection	
Traffic Circle	
Why is this project needed? Briefly describe the traffic safety to solve.	y problem you would like



Oakland Department of Transportation (OakDOT)
Right-of-Way Management Division
250 Frank H. Ogawa Plaza 2nd Floor
Oakland, California 94612

Please present a rough drawing of your project. Add the street names. Show your project location. Show locations of stop signs, ADA curb ramps, trees, and other fixtures. Use this template or provide your own drawing.





Tell us about the Oakland residents who will be responsible for this traffic safety project.

Team Leader

Who will be the project leader and the main point of contact with OakDOT?

Name	Address	Phone	Email
1.			

installation Volunteers (minimum of four)

Who will help to install your project or who will beautify a project installed by the City?

Name	Address	Phone	Email
1.			
2.			
3			
4.			
5.			
6.			

Maintenance and Cleanup Volunteers (minimum of four)

Who will make sure that your project (including equipment, plants, paint. etc.) is in good condition and free of trash or other debris?

Name	Address	Phone	Email
1.			
2.			
3			
4.			
5.			
6.			



Community-Led Traffic Safety (CLTS) Application Checklist

Make sure you include each of the items below when you submit your application to OakDOT at DOTOnlinePermits@OaklandCA.gov or by appointment at 250 Frank H. Ogawa Plaza, 2nd Floor 94612.

Plaza, 2 nd Floor 94612.			
>>>Note: Please include "CLTS" in the subject line of your email.<<<			
	Obstruction (OB) Permit Application		
	Brief description of your project		
	Plan drawing of your project		
	Photographs of the project area (minimum 4)		
	Names and contact information for your team		