**Emergency Work Permit Preliminary Application**

**State of Indiana Department of Transportation EMERGENCY WORK PERMIT**

**PRELIMINARY APPLICATION FOR EMERGENCY WORK WITHIN STATE HIGHWAY RIGHTS-OF-WAY**

**Name and Address of Applicant:**

**Person responsible for work:**

**Telephone No.:**

**Date of Work to Start: Type of Work:**

*Traffic control must be in accordance with the Indiana Manual on Uniform Traffic Control Devices at all times.*

**This is an Emergency because:**

*A regular permit application and payment of fees will be filed via the INDOT Electronic Monitoring System (EPS) no later than: five (5) working days from notification. Emergency work on State Highways Rights-of-Way is defined as that which must be done immediately to protect life or property.*

**Verbal Permission given by:**

**Date:**

**Time**: