

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
NOTIFICATION AND REQUEST FOR FACILITY USE

Submit this form to the appropriate District Maintenance Engineer, Turnpike Engineer or authorized representative not more than 60 days and not less than 3 days prior to proposed activity.

NOTE: ONLY ORGANIZATIONS WHICH HAVE SECURED A SOLICITATION PERMIT MAY UTILIZE THE FACILITIES ON THE STATE HIGHWAY SYSTEM.

Permit Number	Name of Organization or Institution
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SPECIFY REST AREA, OR WELCOME CENTER WHERE THIS ACTIVITY IS PROPOSED:

DATES AND TIMES ACTIVITY WILL BEGIN AND END:	BEGIN DATE AND TIME:	END DATE AND TIME:
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PERSON WHO WILL SUPERVISE OR HAVE RESPONSIBILITY FOR THE ACTIVITY:

Name:	Telephone Number:
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Mailing Address:

PERSONS (LIMITED TO TWO) WHO WILL PARTICIPATE IN THE ACTIVITY:

Name:	Telephone Number:
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Mailing Address:

Name:	Telephone Number:
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Mailing Address:

Signature of Authorized Organization Representative:	Printed Name and Title:	Date Submitted:
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DEPARTMENT OF TRANSPORTATION REVIEW:

The above Activity is is not authorized for the dates, times, and/or facility specified. If not authorized, the reason is: _____

Signature of Authorized Department Official:	Printed Name and Title:	Date:
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