



METRO LANE CLOSURE FORM

- Submit Form to *MetroLC.DOT@state.mn.us*. Submit planned lane closures at least 3 days prior to the lane closure and unplanned closures as soon as possible. Roadway closures require 14 days advanced notice.
- Contact Dispatch by radio or by calling 651-234-7110 at both the start and end of the lane closure.
- Document intrusions and field modifications in your diary.

Closure Metro Central Office Section/Office _____

Highway # _____ Direction NB SB EB WB

Location START (include nearest intersection) _____ MP _____

Location END (include nearest intersection) _____ MP _____

Type of Closure (check all that apply)

- Left Lane Right Lane
- Left Shoulder Right Shoulder
- Left Turn Lane Right Turn Lane
- Left 2 Lanes Right 2 Lanes
- On Ramp Off Ramp
- Reduced to 1 Lane Reduced to 2 Lanes
- Closed Intermittently
- Flagging Operation
- Other _____

Duration

- Intermediate/Night Mobile
- Short Term Long Term
- Short Duration

Day or Night

- Day Night 24-Hour

Permit Restriction

- No Yes Height (ft) _____
- Width (ft) _____
- Weight (ton) _____

Traffic Control

- Plan Set
- [Field Manual Layout](#) # _____
- Planned modifications _____

Type of Work _____

Unplanned, reason _____

Is work outside of the hours permissible in the [Lane Closure Manual](#)? No Yes

If yes, reviewed by* _____ [Metro Work Zones Contacts Map](#) (Internet Explorer ONLY)

Start Date _____ Day _____ Time _____

End Date _____ Day _____ Time _____

Submitted by* _____ Date _____

Email Address* _____ Phone* _____

Additional Comments _____

Date Received _____ Time Received _____ Dispatcher _____

*Required Fields

Select information will be displayed at