



# TOWN OF WINDHAM, NEW HAMPSHIRE

## HIGHWAY SAFETY COMMITTEE

3 NORTH LOWELL ROAD, WINDHAM, NEW HAMPSHIRE 03087

# WIN 4:00:11:98  
Attachment "A"

### Request Form

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Safety Request: \_\_\_\_\_

Explanation: \_\_\_\_\_

Diagram of Area:  Yes, Attached  No

*Do not write below this line. For Town of Windham use only:*

HSC Recommended Action: \_\_\_\_\_ Date: \_\_\_\_\_

Explanation/Comments: \_\_\_\_\_

BOS Decision:  Approved  Denied

If denied, explain: \_\_\_\_\_

\_\_\_\_\_

Print Name

\_\_\_\_\_

Requester Notified:  Mail  Email  Phone  Not Notified \_\_\_\_\_

Initial

\_\_\_\_\_

*To be filled out upon completion of work (if approved):*

\_\_\_\_\_

Road Agent Signature

Print Name