



# Highway Restriction Notice Form

Instructions available [online](#)  
or in [Doc Express](#)

*For internal use only; Restrictions should not be approved or entered into ORION if they do not align with the Mobility Considerations Checklist (if applicable.)*

## Project Information

Title \_\_\_\_\_ Contract No. \_\_\_\_\_ Key No. \_\_\_\_\_

## Restriction Information / Explanation of Work

\_\_\_\_\_ Date Work Begins \_\_\_\_\_ Date Work Ends \_\_\_\_\_

\_\_\_\_\_ Description of the Work (600 character limit)

Hwy No. \_\_\_\_\_ Highway Name \_\_\_\_\_ Route No. \_\_\_\_\_

Beginning Mile Point \_\_\_\_\_ End Mile Point \_\_\_\_\_ Bridge Structure ID (if applicable) \_\_\_\_\_

Yes  No Will the restriction be in place 24 hours per day? If not, specify restriction hours and days (e.g., Sunday to Thursday, 10pm to 5am).

\_\_\_\_\_ Days and Hours (125 character limit)

Which directions of traffic are impacted?  NB  SB  EB  WB

## Full Closures

Yes  No Is this a total closure of the road that impacts all lanes in the direction of travel?

Yes  No Is this restriction notice to close a ramp? If this is YES, what is the ramp/exit number? \_\_\_\_\_

Yes  No Is there an approved detour for oversized loads? If YES, please provide information about the detour.

\_\_\_\_\_ Detour Information

## Restrictions and/or Partial Closures

Provide information in each cell as applicable.

| Type of Restriction   | Maximum (ft/in or lb)<br>(in feet and inches) | Lanes Impacted<br>(Letters A, B, C, etc. are used to specify the lanes. Letter A designates far fast lane, followed by B, C, etc.) | Ramps Impacted |
|---|---|--|----------------|
| Partial Closure   |   |  |                |
| Width<br>(between the barriers including the paved shoulders) |   |  |                |
| Height  |   |  |                |
| Weight (GVW)  |   |  |                |
| Weight (Axle)   |   |  |                |
| Overall Length  |   |  |                |

*For Internal use only: Width and height dimensions provided here are actuals and do NOT include required buffers.*

Yes  No Are you closing any lanes under overpasses or other overhead structure? If YES, please describe:

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Straight  Curve  Both Is the workzone straight, curved or both?

Yes  No Can wider loads be accommodated WITHOUT notice (e.g., by moving barrier(s) or equipment out of the way) with a delay of 20 minutes or less?

Yes  No Can wider loads be accommodated WITH advanced notice? If YES, please provide contact information for arranging the accommodation, along with how much notice is required.

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Yes  No Have you verified that this restriction aligns with contract specifications?

## Signature Information

\_\_\_\_\_  
Submitter's Name

\_\_\_\_\_  
Submitter's Cell Phone

\_\_\_\_\_  
Submitter's Email

\_\_\_\_\_  
Submitter's Additional Phone

\_\_\_\_\_  
Alternate Contact's Name

\_\_\_\_\_  
Alternate Contact's Cell Phone

\_\_\_\_\_  
Alternate Contact's Email

\_\_\_\_\_  
Alternate Contact's Additional Phone