

City of Glendora Department of Public Works
Public Safety Agency Consent Form

We are aware of the planned closure of _____ between

_____ and _____ from

_____ to _____ between the hours of _____ and _____
(DATE) (DATE) (AM / PM) (AM / PM)

**We have no objection as long as traffic control procedures are followed per approved
Traffic Control Plan.**

Glendora Police Department

(Print)

(Signature)

_____ Telephone

_____ Station

Los Angeles County Fire Department

(Print)

(Signature)

_____ Telephone

_____ Station