

# County Construction Sign

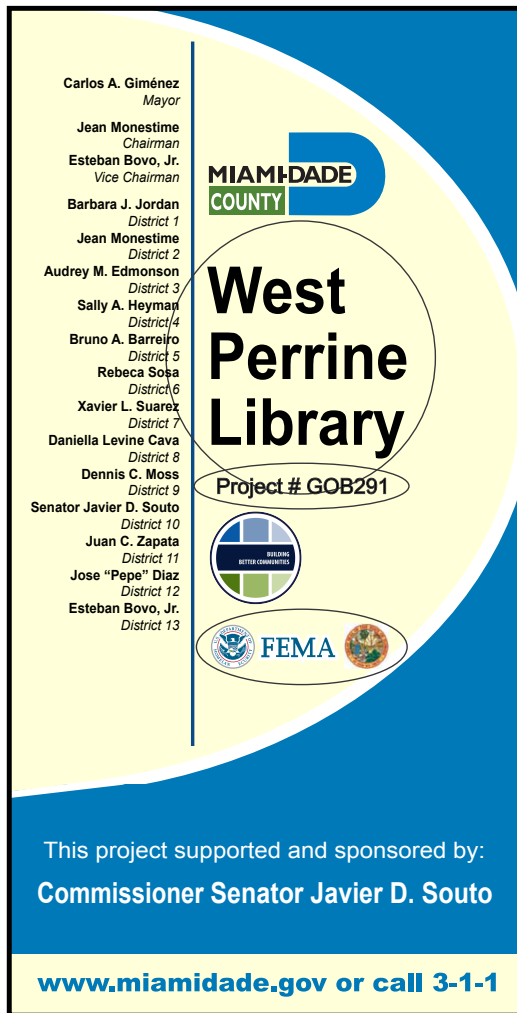
## CHANGE REQUEST

<input type="checkbox"/> In Ground 1 Sided	<input type="checkbox"/> In Ground 2 Sided
<input type="checkbox"/> A-Frame 1 Sided	<input type="checkbox"/> A-Frame 2 Sided

- Replacement of Existing Sign
- Relocation of Existing Sign
- Repair of Existing Sign

This Form to be Email to:  
**Makington Chery: cmakin@miamidade.gov**  
**and Hernan Lopez: lopezh@miamidade.gov**

Sign is 4' X 8' with 12' post



### Services Ticket

### Index code

### Quantity required

### Project Manager

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

Department: \_\_\_\_\_

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

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

### Project Name

### Sign location address

Plus specific location of sign placement

- Project Manager to mark location of sign(s) on site.
- Installer to call Sunshine 811 for underground inspection before digging.