



177 North Center Street
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**APPLICATION & AGREEMENT FOR USE OF
VILLAGE OF VERSAILLES TRAFFIC CONTROL DEVICES**

I, _____, am requesting the use of (#) _____ safety cone(s) and/or
(#) _____ barricades from the Village of Versailles. I promise, understand, and agree that I am
responsible for picking up and returning the traffic control device(s) to the Village of Versailles. If
there is any damage to the traffic control devices or any are missing and not returned to the Village
of Versailles, I will pay the Village of Versailles the replacement cost of the device(s).

I will be picking up the traffic control devices on _____ and returning the
devices on _____. (Required)

Signed this _____ day of _____, 20_____.

Applicant's Signature

Village of Versailles

Address

Telephone Number

**Note: Traffic control devices should be picked up and/or returned Monday
through Friday, between 7:30 a.m. to 11:30 a.m. and 12:00 p.m. to 3:30
p.m., excluding observed holidays.**

This form must be signed by a Village employee when items are returned.

Condition: _____ Good _____ Damaged (Note extent of damage)

Employee Signature

Date Returned