

TOWN OF PARKER ROADSIDE MEMORIAL SIGNAGE PROGRAM CRITERIA

A sign must be requested by the victim's immediate family or sponsor with the consent of the victim's immediate family.

Signs may *only* be installed on Town roadways. Please note that Parker Road (State Highway 83) requests must go through CDOT.

Applicant shall pay the Town \$100 which will be donated to the South Metro Safety Foundation. Up to three (3) names may be included on one sign with multiple victims. Payment is due after the Town approves the application.

The Town will fabricate, install and maintain the sign for eight (8) years from the date of initial installation. The Town will return the sign to the family after eight (8) years.

ADDITIONAL SPECIAL REQUIREMENTS FOR "DON'T DRINK AND DRIVE" SIGNS FOR FATAL ALCOHOL/DRUG (DUI) RELATED CRASHES

There must be a conviction of the driver involved in a fatal crash who was in violation of Colorado DUI laws, or a toxicology report must show the victim driver to have been in violation of Colorado's DUI laws **and** only with the permission of the crash victim's immediate family members.

Program information is available online at

www.parkeronline.org or from the

Town of Parker

Public Works Department

20120 E. Mainstreet

Parker, CO 80138

or by calling Town of Parker at (303) 840-9546

TOWN OF PARKER ROADSIDE MEMORIAL SIGN APPLICATION		Please print information
Name of person or group applying for sign:		Daytime phone number:
		E-mail address:
Mailing address:		City:
		State:
		Zip code:
Date of fatal crash:	Location of crash (Town roadway and nearest intersection, if known):	
Victim's name(s) (as they should appear on the sign)	Victim's name(s) (as they appear on the accident report)	
1 _____	1 _____	
2 _____	2 _____	
3 _____	3 _____	
Investigating law enforcement agency:	Name of the driver on the accident report:	
Roadside Memorial Sign message to be included on the sign (please choose one):		
<input type="radio"/> DON'T DRINK AND DRIVE (Note specific requirements above)		
<input type="radio"/> PLEASE DRIVE SAFELY (for any fatalities)		
<input type="radio"/> PLEASE RIDE SAFELY (for motorcycle/bicycle fatalities)		
<input type="radio"/> PLEASE BUCKLE UP (for fatalities where victim was not wearing a seat belt)		
Preferred sign location (please choose one):		
<input type="radio"/> LOCATION AS SHOWN ON THE ACCIDENT REPORT (provided by Town)		
<input type="radio"/> LOCATION AS SHOWN ON THE ATTACHED SKETCH (provided by applicant)		
Victim's immediate family signature(s):	Applicant signature:	
Date:	Date:	

NOTE: Applicant will be required to remit a check, payable to the Town of Parker in the amount of \$100, once sign application is approved. Please keep the Town informed of any change of address.