

Traffic Control Devices

STCDM WC-09

Section: WARNING SIGNS

Subject: APPLICATION FORM

SCHOOL BUS STOP AHEAD SIGN (INSTALLATION OR REMOVAL) SIGN APPLICATION FORM

Request to install _____ remove _____ School Bus Stop Ahead Signs.

Applicant: _____

Address: _____

Postal Code: _____ Telephone number: _____

Email Address: _____

A School Bus Stop Ahead sign is required, or to be removed for the following reasons:

Number of Children _____ Ages _____

Sign Location: Provincial Highway No. _____ Land Location/Description _____

Other/Specify _____

Are signs requested for each direction of travel? _____ If no, for which direction is a sign required _____

School Division _____ No. _____

School Division recommends _____ does not recommend _____ installation of School Bus Stop Ahead signs.

INSTRUCTIONS TO APPLICANTS

Return Application to School Division for referral to appropriate agency:

- For Provincial Highways, the Ministry of Highways, see [Link to Regional Office Areas Map](#) to find appropriate Regional Office location
- For rural roads, to Rural Municipality
- For or urban streets, Urban Community

For Office Use Only

Recommended By _____ Date _____

Approved By _____ Date _____