



East Central Region Traffic Interruption Reporting (TIR) Form

Regional Traffic Management Center (205) 251-1397

Submit form to: bhmalgortir@dot.state.al.us

Name:

Date:

Cell Phone:

Email:

Project #:

District:

County:

City:

Road Type:

Road Name:

Direction:

Number of travel lanes in one direction:

Begin MP:

Closest cross street or landmark:

End MP:

Closest cross street or landmark:

TIR Start Date:

TIR Start Time:

TIR End Date:

TIR End Time:

Type of work (if other explain in notes section):

List which lane(s)/shoulder(s) are affected:

POC Name:

POC Cell #:

Notes:

Reset Form

ATTACHMENT B