Obstruction of Vision • Roadway Concern Notification Form _____County Road Department Address _____City/Montana/Zip Code Phone number Website Date/Time Notice Issued:_____ Person Receiving Notice: Name of Resident: Address of Resident: City/Town, Montana 59XXX Contact Info: Phone _____ Email____ Objects or vegetation were noticed in the vicinity of your residence that impair visibility of the traveling public. We ask your cooperation in removing this obstruction to assure safety for motorists and reduce the joint liability that we share. For those objects within the county right of way, we ask that they be removed or the county will remove them after ten days.

How was contact made: In Person______ By Phone:______
Solution to Notice:_____

Notice Assigned to: _____ Date Assigned:_____