

**ALTERNATE ASSIGNMENT OF
PAYMENT FORM**



**This form will be kept by the City of Tempe, Public Works Department for purposes of
fees for Traffic Control Barricading**

Please complete and fax to 480.350.8878

CUSTOMER NAME: _____

ADDRESS: _____

PHONE #: _____

We the above named barricade company wish to pursue the alternate assignment of payment and will communicate with our client, the contractor, the need to submit to the City of Tempe the traffic control plan as well as payment for any fees associated with construction taking place in the public right-of-way.

AUTHORIZED SIGNATURE: _____

For City of Tempe Office Use Only:

CUSTOMER ACCOUNT NUMBER: _____

PROCESSED BY: _____

COMMENTS: _____