

STREET LIGHT REQUEST AND/OR REPAIR REPORTING FORM

PLEASE BE ADVISED THAT ANY MISSING INFORMATION MAY/CAN CAUSE A DELAY IN YOUR REPAIR REQUEST.

1) † PROBLEM: _____

(REQUEST NEW LIGHT, LIGHT OUTAGE, CYCLING ON/OFF, LIGHT ON DURING DAY ETC...)

2) STREET LIGHT POLE NUMBER: _____

(POLE NUMBER IS FACING STREET AT EYE LEVEL)

3) STREET ADDRESS CLOSEST TO THE LIGHT POLE REQUEST: _____

4) CROSS STREET NEAREST LIGHT POLE REQUEST: _____

5) CALLER' S NAME AND PHONE NUMBER: _____

NOTE: IF REQUESTING THE INSTALLATION OF A NEW STREET LIGHT ON AN EXISTING POLE, YOU MUST CONTACT YOUR CITY COUNCILOR TO REPORT AND FULFILL YOUR REQUEST.

PLEASE BE ADVISED THAT ANY MISSING INFORMATION MAY/CAN CAUSE DELAYS IN REPAIR REQUESTS.

***** ALL FIELDS ARE REQUIRED. *****

ONCE COMPLETED- PLEASE EMAIL FORM TO: dpw@cobma.us OR CALL (508) 580-7810 AND PROVIDE ALL ABOVE NECESSARY INFORMATION.