

PICKENS COUNTY SCHOOLS

TRANSPORTATION DEPARTMENT

BUS DRIVER REQUEST FOR ROAD REPAIR

Date of Request: _____ 20____

Driver Requesting: _____

Bus or Route # _____

Location: _____

City: _____ County: _____ Private: _____ State: _____

Road Surface: PAVED: ASPHALT/CONCRETE: _____

TAR & GRAVEL: _____

DIRT WITH BASE BED: _____

DIRT: _____

Describe condition requiring maintenance:

WASHOUT: _____ LOOSE SURFACE: _____ SCRAPE: _____

LOOSE OR SOFT SURFACE: _____ RUTS: _____

OTHER maintenance needed for safe school bus travel:

FAXED TO ROAD DEPARTMENT: