



**GOSHEN COUNTY ROAD ADVISORY COMMITTEE
REPORTING FORM**

DATE REPORTED: _____

REPORTED BY: _____ PHONE NUMBER: _____

REPORTED TO: _____

LOCATION (ROAD NUMBER, CROSS ROADS AND/OR ADDRESS. PLEASE BE SPECIFIC.):

ISSUE: (HOLE, DRAINAGE, NEED GRAVEL, ETC. PLEASE BE SPECIFIC.)

DO YOU HAVE ANY SUGGESTIONS TO HELP RESOLVE THE PROBLEM?:

FOR OFFICE USE ONLY

DATE RECEIVED BY COUNTY CLERK: _____

DATE RECEIVED BY COMMISSIONERS: _____

DATE RECEIVED BY ROAD AND BRIDGE: _____

RECEIVED BY: _____

PLAN FOR RESOLUTION:

DATE RESOLVED OR PLAN IMPLEMENTED: _____

DISCLAIMER: Goshen County expressly reserves governmental immunity, and specifically retains all immunities and defenses available to the County as sovereigns or governmental entities pursuant to Wyo. Stat. §1-39-101, et seq., and all other applicable law.