

City of Aitkin Cone check out

Date out: _____

Time out: _____

Date in: _____

Time in: _____

Number of cones picked up: _____

Number of Cones returned: _____

Time Needed: _____

Name of Group/Person using cones *(please print)*: _____

Address: _____

Phone #: _____

Location cones will be used:

Signature: _____

Date: _____

-cones must be picked up and returned to the City of Aitkin Street department shop located at 803 4th Ave. N.W.

-pick up and drop off times must be coordinated with street department staff

-availability of cones is subject to the needs of the street department

**** Any cones not returned or damaged
will be billed to borrower at \$35 per cone plus
administrative charges****