



# Delaware Department of Transportation

## Adopt-A-Bike Path Application



Please submit online at [DelDOT.gov](http://DelDOT.gov), e-mail to [dotpublic@delaware.gov](mailto:dotpublic@delaware.gov) or mail to Department of Transportation - Adopt-A-Bike Path Program - PO Box 778 Dover, DE 19903.

Date: \_\_\_\_\_

I/we request permission to adopt a bike path in \_\_\_\_\_ County located at:

\_\_\_\_\_.

(the bike path must be state owned – bike paths over 2-miles in length may be broken down into 2-mile sections)

We agree that work will be performed under and in accordance with the Delaware Department of Transportation’s AABP conditions included in this application packet and incorporated herein by reference.

We further agree that upon approval, each participating member of our organizations, for themselves, shall at all times indemnify and save harmless the Delaware Department of Transportation (DelDOT) and DelDOT employees, agents and officers from responsibility, damage or liability arising from the exercise of the privileges granted in such applications.

We further agree that this application may be terminated by DelDOT at any time DelDOT determines that, in its opinion, the applicants do not comply with the conditions of this program or at any time the applicants’ work under this program is unsafe or causes a conflict with traffic. The Department reserves the right to revise or discontinue this program at any time.

PLEASE PRINT

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Path Adopted By: \_\_\_\_\_

(name to appear on sign – limit 28 spaces including spaces and punctuation)

Signature: \_\_\_\_\_

**OFFICE USE ONLY:** The undersigned hereby accepts the above organization’s agreement for the adoption of a bike path located at \_\_\_\_\_.

\_\_\_\_\_  
**District Engineer**

\_\_\_\_\_  
**Date**

cc: Sign Shop  
Office of Public Relations

\_\_\_\_\_  
**Sponsor ID**