

PETITION FOR REMOVAL OF TRAFFIC CALMING DEVICES

We the residents of the _____ Traffic Calming Area, are signing this petition requesting the REMOVAL of the following traffic calming devices in the attached plans (see back of petition) titled "_____ Area Removal of Traffic Calming Devices." It is understood signatures from more than 50% (___) of the residents in the study area must provide their signature for removal of the traffic calming devices. (DATE)

Streets within Boundaries:			
SEQ. #	PRINTED NAME	ADDRESS	SIGNATURE
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For information regarding the Traffic Calming Program or this petition contact the Traffic Calming Coordinator at 337-291-8549.

