Traffic Calming Application



Please use this form to request traffic calming for your street. Note that neighborhood support is required prior to the data collection phase.

Contact Information

Name:	
Phone:	
Address:	
Email:	

Request Location

1. Please identify the location of your concerns. No more than two streets should be included on one application.

	Intersection	or	Street	Block/	Blocks
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Traffic Concerns

2.	Where	is your	traffic	concern	located?

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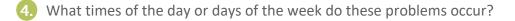
○ At an intersection

O Between intersections

Both

Indicate and prioritize the issues you hope to address through traffic calming.

Most important —				— Less important	
	\bigcirc^2	\bigcirc		\bigcirc	Vehicle speeds
	\bigcirc^2	\bigcirc ³	\bigcirc ⁴	\bigcirc	Drivers not yielding to pedestrians
	\bigcirc^2	3		\bigcirc ⁵	Traffic volumes or cut-through traffic
	\bigcirc^2	\bigcirc 3	\bigcirc^4	\bigcirc^5	Crashes
	\bigcirc^2	\bigcirc 3	4	\bigcirc^5	Difficult to bike
	\bigcirc^2	\bigcirc ³		\bigcirc	Other (describe below)



What additional factors do you think should be considered in the evaluation? For example, any unique conditions or circumstances.

6. Other information regarding your concern. Please attach photos, sketches, or other supporting information about the problem.

Submit completed application to Traffic.Calming@minneapolismn.gov or mail to:

Traffic & Parking Services 300 Border Ave N Minneapolis, MN 55405

