City of Loveland Neighborhood Traffic Calming Program Application

This application is required to begin the traffic calming process.

If you have any questions, please contact Nathan Beauheim at (970) 962-2644.

Send completed application to:

City of Loveland, Traffic Division
105 W. 5th St
Loveland, CO 80537

Please print

Date: _____

Neighborhood Representative: _____
(Your Name)

Address: _____ e-mail: _____

Zip Code: _____ Phone: _____

Name of homeowners' association (if there is one) & contact person:

_____

Location of traffic problem, street(s) &/or intersection(s) affected:

_____

Nature of concern: (please rank 1, 2, 3, ..., with 1 being the most severe)

	Speeding		Child safety issues
	Traffic volume/cut through traffic		School zone issues
	Accident problem (please describe what you have observed)		Other (please explain below)

_____

_____

_____

_____

Office use only _____ *App. Rec'd* _____ *Ph 1* _____ *Counts* _____ *Ph 2*

Have you contacted the City before about your concerns? If yes, please explain:

_____

What day(s) of the week & time(s) does the problem appear to be the worst?

_____

Describe who you feel is causing the problems in your area.

_____

What do you think would best help this situation?

_____

_____

Please include a list of at least 5 neighbors who support your concerns, including their names, addresses, phone numbers and signatures.

Name	Address	Phone	Signature