Stephenie



TRAFFIC/PARKING ZONE REQUEST FORM

APPLICATION NO:

FINDING AND ORDER APPLICATION
Engineering Department * Phone: (508) 789-7505 * Fax: (508) 789-3184
www.chroflacrosse.org/engineering engineering@Cityoflacrosse.org

DATE:

STATUS:	APPLICATION TYPE:	Charles Indicated the Control	PARCEL ID:
	1		
	APPLICANT	NEORMATION: U.S.	
NAME (FIRST, MI, LAST): // /	And State of the S	1400 - Anna Carlo Marca Carlo	DATE:
Alen Held	1		1 7. FF-2030
ADDRÉSS (STREET, CITY, STATE, ZIP):	Corneland AU	Le Crusse W.	D'
PRIMARY PHONE NUMBER:	EMAIL ADDRESS:		5
608 769 3970	<u> </u>		
	SELECTRAFFICA	REA DETAILS	
East + West 5:	Ve of Copeland	Au from Go	uld st to the
Train tracks			
PURPOSE OF REQUEST: ADD ZONE	REMOVE ZONE	FFIC CONTROL (Stop, Yleid)	DIRECTIONAL CONTROL (Turning Lane)
ZONE TYPE: PARKING (No Parking, PEDESTRIAN (Crosswa		ECTION OF TRAVEL (One Way)	OTHER (Specify in Comments)
COMMENTS:		III A THE STATE OF	
No overn	ight parking		
The undersigned understand and agrees to	the following:	and the second s	÷
n new tea of some mean datters are	cublest to annound by the Board o	f Public Works (BPW) or Common	Council;
3 Implementation shall comply as	necessary with Wisconsin State Sta meeting date for public hearing bef	tutes, City of La Crosse Municipal	Code, and the MUTCD;
5. Attaching a petition may be ben	eficial in the decision-making proce	\$5.	47
alan F H	eld	OWNER	9-22-20
APPLICANT OR AUTHORIZED REPRESENTAT	TVE SIGNATURE (TYPED**)	TITLE	DAVE
	TRAFFICENGI	NEER USE ONLY	Supplemental English Supplemental Supplement
DATE RECEIVED:			
	□ NO	PETITION REQUIRED: YES	NO NO
TRAFFIC ENGINEER COMMENTS:	= ,		*
E 20)
		X	:
	POLICE PARKING	UTILITYUSEONLY	
DATE RECEIVED:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	REVIEWED BY:	
POLICE PARKING UTILITY COMMENTS:			
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8 E		8	1,
			the state of the s
	BOARD OF PUBLI	WORKS USE ONLY	e): DATE/TIME OF NOTIFICATION:
BOARD OF PUBLIC WORKS MEETING DATE:	8	APPLICANT NOTIFIED BY (NAM	EJ: DATE/ HIVE OF NOTIFICATION.
COMMENTS:		1,	
School Control Control			
APPROVED DENIED		EFFECTIVE DATE:	
L. ATTENDED L. DENIES			

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STATUS:

NAME (FIRST, MI_LAST):) APP 164	NTINEORMAIDENEE EEEE	Construction Tre
ADDRESS (STREET, CITY, STATE, ZIP):	1 A.	aview brown	
PRIMARY PHONE NUMBER: V	EMAIL ADDRESS:	11 Erlendon	29/16 century line.
600 / 12 30 3-			il
LOCATION OF REQUEST - BE SPECIFIC (PROV West Side Train trac	of Copel	and Av from Also East Sid	Gould St to
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	ght parking	\	
a resultant for the characteristics of the complete of the characteristics of the character	rantee the desired outcome; ubject to approval by the Bos ecessary with Wisconsin Stati leeting date for public hearin;	ard of Public Works (BPW) of Cottinion (g Statutes, City of La Crosse Municipal (g before BPW or Common Council)	and the moreon
Don Earles	, ,	President	8-12-20
APPLICANT OR AUTHORIZED REPRESENTATIVE	/E SIGNATURE (TYPED==)	TITLE	8-12-70 DATE
APPLICANT OR AUTHORIZED SEPRESENTATION "By typing your name, this constitutes a legit	/E SIGNATURE (TYPED==)	TITLE	
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