



**TRAFFIC/PARKING ZONE REQUEST FORM
FINDING AND ORDER APPLICATION**

Engineering Department * Phone: (608) 789-7505 * Fax: (608) 789-8184
www.cityoflacrosse.org/engineering engineering@cityoflacrosse.org

		APPLICATION NO:
		DATE:
STATUS:	APPLICATION TYPE:	PARCEL ID:

APPLICANT INFORMATION

NAME (FIRST, MI, LAST): Erica M. Erdmann		DATE: 11/30/2022
ADDRESS (STREET, CITY, STATE, ZIP): 230 Pine Street. La Crosse, WI 54601		
PRIMARY PHONE NUMBER: 507-450-4824	EMAIL ADDRESS: eerdmann@weber-health.com	

TRAFFIC AREA DETAILS

LOCATION OF REQUEST - BE SPECIFIC (PROVIDE PHOTOS IF AVAILABLE):
Please see attached picture. We are looking to add a ADA Parking Spot for our patients out front of the new Viaro Health Clinic. This is on Pine Street and would like it right out front on 3rd Street.

PURPOSE OF REQUEST: **ADD ZONE** **REMOVE ZONE**

ZONE TYPE: **PARKING (No Parking, Loading Zone, 2 Hour)** **TRAFFIC CONTROL (Stop, Yield)** **DIRECTIONAL CONTROL (Turning Lane)**
 PEDESTRIAN (Crosswalk, Advanced Warning) **DIRECTION OF TRAVEL (One Way)** **OTHER (Specify in Comments)**

COMMENTS:
ADA Parking Spot on 3rd Street.

The undersigned understand and agrees to the following:

1. The completed form does not guarantee the desired outcome;
2. Results of recommendations are subject to approval by the Board of Public Works (BPW) or Common Council;
3. Implementation shall comply as necessary with Wisconsin State Statutes, City of La Crosse Municipal Code, and the MUTCD;
4. The applicant will be notified of meeting date for public hearing before BPW or Common Council;
5. Attaching a petition may be beneficial in the decision-making process.
6. Parking requests need to come from or have approval from the Property Owner(s).

Erica M. Erdmann	Director of Clinical Operations	11/30/2022
APPLICANT OR AUTHORIZED REPRESENTATIVE SIGNATURE (TYPED**)	TITLE	DATE
<i>**By typing your name, this constitutes a legally binding, electronic signature</i>		

TRAFFIC ENGINEER USE ONLY

DATE RECEIVED:	REVIEWED BY:
TRAFFIC STUDY REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO	PETITION REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO
TRAFFIC ENGINEER COMMENTS:	

POLICE PARKING UTILITY USE ONLY

DATE RECEIVED:	REVIEWED BY:
POLICE PARKING UTILITY COMMENTS:	

BOARD OF PUBLIC WORKS USE ONLY

BOARD OF PUBLIC WORKS MEETING DATE:	APPLICANT NOTIFIED BY (NAME):	DATE/TIME OF NOTIFICATION:
COMMENTS:		
<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	EFFECTIVE DATE:	