



**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

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

APPLICANT INFORMATION

NAME (FIRST, MI, LAST): <i>Shannon G. Foster - Bottoms Up</i>	DATE: <i>2.14.24</i>
ADDRESS (STREET, CITY, STATE, ZIP): <i>500 Copeland Ave.</i>	
PRIMARY PHONE NUMBER: <i>608 317 0495</i>	EMAIL ADDRESS: <i>shangf74@hotmail.com</i>

TRAFFIC AREA DETAILS

LOCATION OF REQUEST – BE SPECIFIC (PROVIDE PHOTOS IF AVAILABLE):
500 Copeland Ave. Bridge side

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:

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).

<i>[Signature]</i>	<i>owner</i>	<i>2.14.24</i>
APPLICANT OR AUTHORIZED REPRESENTATIVE SIGNATURE (TYPED**)	TITLE	DATE

***By typing your name, this constitutes a legally binding, electronic signature*

TRAFFIC ENGINEER USE ONLY

DATE RECEIVED: <i>2/16/24</i>	REVIEWED BY: <i>SJS</i>
TRAFFIC STUDY REQUIRED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	PETITION REQUIRED: <input type="checkbox"/> YES <input checked="" 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: <i>3/11/24</i>	APPLICANT NOTIFIED BY (NAME):	DATE/TIME OF NOTIFICATION:
COMMENTS:		
<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	EFFECTIVE DATE:	