



**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): H & S Redimix		DATE: 12-15-20
ADDRESS (STREET, CITY, STATE, ZIP): N6200 CR XX, Onalaska, WI 54650		
PRIMARY PHONE NUMBER: 608-769-9940	EMAIL ADDRESS: jrstrupp@yahoo.com	

**TRAFFIC AREA DETAILS**

LOCATION OF REQUEST – BE SPECIFIC (PROVIDE PHOTOS IF AVAILABLE):  
North curb line of Ramsey Place from 1601 Ramsey Place going West to Gateway Court

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:  
Would like no parking along North side of street from 1601 driveway going West to Gateway court as traffic visibility is extremely poor.

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.

William D Strupp	Vice-President	12-15-20
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:	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: