



**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:
PARCEL ID:

STATUS:	APPLICATION TYPE:
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APPLICANT INFORMATION

NAME (FIRST, MI, LAST):	MICHAEL J. DURAND	DATE:	2-15-25
ADDRESS (STREET, CITY, STATE, ZIP):	2219 COULEE DR. LA CROSSE, WI 54601		
PRIMARY PHONE NUMBER:	608-789-6545	EMAIL ADDRESS:	msdurand4@aol.com

TRAFFIC AREA DETAILS

LOCATION OF REQUEST - BE SPECIFIC (PROVIDE PHOTOS IF AVAILABLE):
EAST AVENUE, BETWEEN LA CROSSE ST (HWY 16) AND MYRICK PARK DR.
WEST SIDE ONLY

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: PLEASE, RETURN TO NORMAL STREET PARKING WITH A NO OVERNIGHT PARKING MIDNIGHT TO 5:00 AM.

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).

APPLICANT OR AUTHORIZED REPRESENTATIVE SIGNATURE (TYPED**)	MICHAEL J. DURAND	TITLE		DATE	2-15-25
<small>**By typing your name, this constitutes a legally binding, electronic signature</small>					

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:	

TRAFFIC/PARKING ZONE REQUEST FORM

JACKSON 608-789-7365