

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:		

	www.cityoflacrosse.org	g/engineering engineering@cityoflac	rosse.org
STATUS:	APPLICATION TYPE:		PARCEL ID:
	ADDITION	CANT INFORMATION	
NAME (FIRST, MI, LAST):	APPLI	CAIT IN CHIMATION	DATE:
oshua J Hein			6/29/23
ADDRESS (STREET, CITY, STATE,	7IP)·		
625 Loomis Street, La			
PRIMARY PHONE NUMBER:	EMAIL ADDRESS:		
608-518-9301	jjhein67@gmail.com	1	
	TDA	TELC ADEA DETAILS	
LOCATION OF REQUEST - RE SP	ECIFIC (PROVIDE PHOTOS IF AVAILABLE	AFFIC AREA DETAILS	
Yield sign at intersection	of Loomis Street and Rubilee	e Street on North Side of La Cro , allowing Loomis traffic to move	sse. Prefer to stop traffic on enorth and south freely.
PURPOSE OF REQUEST: 📝 A	DD ZONE REMOVE ZONE		
ZONE TYPE: PARKING (I	No Parking, Loading Zone, 2 Hour)	TRAFFIC CONTROL (Stop, Yield)	☐ DIRECTIONAL CONTROL (Turning Lane)
☐ PEDESTRIA	N (Crosswalk, Advanced Warning)	☐ DIRECTION OF TRAVEL (One Way)	☐ OTHER (Specify in Comments)
COMMENTS: We have witnessed too straight through either st The undersigned understand a	reet without even a glance at	s, and seen at least one bad acc the cross traffic, and its not safe	cident recently. People often drive e for pedestrians either.
 The applicant will be Attaching a petition 	Il comply as necessary with Wisconsin S notified of meeting date for public hea may be beneficial in the decision-makin ed to come from or have approval from	ng process.	6/29/23
		TITLE	DATE
By typing your name, this con	EPRESENTATIVE SIGNATURE (TYPED) stitutes a legally binding, electronic sign	TITLE nature	DATE
		C ENGINEER USE ONLY	
DATE RECEIVED: (a/3	0/23	REVIEWED BY: 573	ノ
TRAFFIC STUDY REQUIRED:	YES NO	PETITION REQUIRED: YES	S ⊠NO
TRAFFIC ENGINEER COMMENT	E/w Yiela	d a	
	POLICE PA	ARKING UTILITY USE ONLY	
DATE RECEIVED:		REVIEWED BY:	
POLICE PARKING UTILITY COM	MENTS:		
199			
		THE HEAVE HER CALLY	
e ky Halfman I I II.		APPLICANT NOTIFIED BY (NAM	TE): DATE/TIME OF NOTIFICATION:
BOARD OF PUBLIC WORKS ME	ETING DATE:	APPLICANT NOTIFIED BY (NAM	DATE TIME OF NOTHICATION.
COMMENTS:			
APPROVED DENIE	D	EFFECTIVE DATE:	