



TRAFFIC CALMING / TRAFFIC ENGINEERING REQUEST

Name: _____

Address: _____

Street for Review (From/To): _____

Day Phone No.: _____ Email Address: _____

Are you willing to be the "Point of Contact" regarding this Traffic Calming / Traffic Engineering request in your neighborhood?

Yes No*

*If no, please revise information section of form with someone willing to be the point of contact.

Please check any issues that apply to your street:

- | | |
|---|--|
| <input type="checkbox"/> Speed of automobile traffic | <input type="checkbox"/> High pedestrian volume |
| <input type="checkbox"/> Volume of automobile traffic | <input type="checkbox"/> Number of accidents |
| <input type="checkbox"/> Sign Installation | <input type="checkbox"/> Sight Visibility |
| <input type="checkbox"/> Cut-through traffic | <input type="checkbox"/> Sidewalks, crosswalks, bike lanes, lighting, etc. |

Please elaborate on the specific problems on your street or in your neighborhood:

Once completed, please send your completed request form to:

Washoe County - Community Services Department

Attn: Engineering Division - Traffic

1001 E. Ninth Street

Reno, NV 89512

Phone: 775-328-2040 Email: Engineering@washoecounty.us