

COUNTY OF SAN MATEO – DEPARTMENT OF PUBLIC WORKS

NEIGHBORHOOD TRAFFIC CALMING REQUEST PETITION FORM

(Attach additional pages as necessary.)

The undersigned residents of _____ between _____
(insert street name) *(insert cross street 1)*
and _____ hereby request the above-named street to be considered for the
(insert cross street 2)
County of San Mateo Neighborhood Traffic Management Program.

We have obtained signatures from _____ property owners/residents on the attached petition.
(insert number)

Please note that a request and petition form does not guarantee installation of any traffic calming devices, and each request must be evaluated.

RETURN COMPLETED FORM AND ORIGINAL SIGNATURES TO:

San Mateo County Department of Public Works
Attention: Traffic Operations
752 Chestnut Street, Redwood City, CA 94063
(650) 363-4103

Neighborhood Traffic Calming Request Petition

_____ between _____ and _____
(insert street name) (insert cross street 1) (insert cross street 2)

(insert unincorporated area, city)

NAME	ADDRESS (Include Apartment #)	TOPIC OF CONCERN	SIGNATURE

