

**CITY OF ALBANY
REQUEST FOR TRAFFIC CALMING MEASURES
PETITION FORM**

To: City of Albany - Community Development Director
1000 San Pablo Avenue
Albany, CA 94706

Date Submitted: _____

The undersigned petitioners fronting on: _____ between the intersections of _____ and _____,
(Name of Street)
request the INSTALLATION of traffic calming measures on the block referenced above.

How many housing units are within the area specified above? _____

Block representative: Name _____ Address _____ Phone _____

All undersigned petitioners hereby acknowledge that they have read and understood the following prior to signing:

1. PROJECT MAY INCREASE FIRE AND MEDICAL EMERGENCY RESPONSE TIME AND INCREASE NOISE AND VIBRATION LEVELS.
2. Signs and pavement markings are installed along with traffic calming measures and placement of these is in accordance with design guidance.
3. Installation is dependent upon evaluation by the Transportation Commission, funding availability, and authorization by City Council.
4. Please note that if your block is eligible, **at least 67% of the households** must support the installation.
5. Removal of the traffic calming measures may be initiated by the City if post-installation surveys indicate significant traffic diversion.
6. Removal of the traffic calming measure at the request of residents would require a petition representing consent of at least 67% of the residents. Removal is dependent upon evaluation by the Transportation Commission, funding availability, and authorization by City Council.

NAME	HOUSE NUMBER	DAY TIME PHONE	SIGNATURE	SUPPORT REQUEST		WOULD YOU SUPPORT REQUEST IF BUILT IN FRONT OF YOUR PROPERTY?	
				YES	NO	YES	NO
1.				YES	NO	YES	NO
2.				YES	NO	YES	NO
3.				YES	NO	YES	NO
4.				YES	NO	YES	NO

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				YES	NO	YES	NO
5.				YES	NO	YES	NO
6.				YES	NO	YES	NO
7.				YES	NO	YES	NO
8.				YES	NO	YES	NO
9.				YES	NO	YES	NO
10.				YES	NO	YES	NO
11.				YES	NO	YES	NO
12.				YES	NO	YES	NO
13.				YES	NO	YES	NO
14.				YES	NO	YES	NO
15.				YES	NO	YES	NO
16.				YES	NO	YES	NO
17.				YES	NO	YES	NO
18.				YES	NO	YES	NO
19.				YES	NO	YES	NO
20.				YES	NO	YES	NO
21.				YES	NO	YES	NO

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NAME	HOUSE NUMBER	DAY TIME PHONE	SIGNATURE	SUPPORT REQUEST		WOULD YOU SUPPORT REQUEST IF BUILT IN FRONT OF YOUR PROPERTY?	
				YES	NO	YES	NO
22.				YES	NO	YES	NO
23.				YES	NO	YES	NO
24.				YES	NO	YES	NO
25.				YES	NO	YES	NO
26.				YES	NO	YES	NO
27.				YES	NO	YES	NO
28.				YES	NO	YES	NO
29.				YES	NO	YES	NO
30.				YES	NO	YES	NO
31.				YES	NO	YES	NO
32.				YES	NO	YES	NO
33.				YES	NO	YES	NO
34.				YES	NO	YES	NO
35.				YES	NO	YES	NO
36.				YES	NO	YES	NO
37.				YES	NO	YES	NO
38.				YES	NO	YES	NO