City of Loveland Neighborhood Traffic Calming Program Application

This application is required to begin the traffic calming process.

Ifyou have any questions, please contact Tyler Mead at (970) 962-2750.

Send completed application to:



City of Loveland, Traffic Division 105 W. 5th St Loveland, CO 80537 Traffic@CityofLoveland.org

Please print_	Date:			
Neighborhood Representative:				
	(Your Name)			
Address:	e-mail:			
Zip Code: Phone:				
Name of homeowners' association (if there is one) & contact person:				
ocation of traffic problem, street(s) &/or intersection(s) affected:				
Nature of concern: (please rank 1, 2, 3,, with 1 being the most severe)				
Speeding	Child safety issues			
Traffic volume/cut through traffic	School zone issues			
Accident problem (please describe what you have observed)	Other (please explain below)			
Office use only App. Rec'd	Ph 1 Counts Ph 2			

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Have you contacted the City before about your concerns? If yes, please explain:				
What day(s) of the week & time(s) does the problem appear to be the worst?				
Describe who you feel is causing the problems in your area.				
What do you think would best help this situation?				
Please include a list of <u>at least 5 neighbors</u> who support your concerns, including their names, addresses, phone numbers and signatures.				
Name	Address	Phone	Signature	