



# BALLINGER NEIGHBORHOOD TRAFFIC ACTION PLAN Comment Form

Please use this form to record your input to the proposed recommendations identified in the draft Ballinger Neighborhood Traffic Action Plan. Include your name, address, and phone number so that we may contact you for further clarification or follow-up.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Which option best describes your over-all support for the proposed plan:

- Strongly support
  Somewhat support
  No opinion  
 Somewhat oppose
  Strongly oppose

List the recommendations which you feel are most important to your neighborhood:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Please list any recommendations which you do not support, and why:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_

*(Use reverse side if needed)*

General Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Please return this comment form:* City of Shoreline; c/o Traffic Services; 17544 Midvale Ave N, Suite 100; Shoreline, WA 98133  
For more information, contact Associate Traffic Engineer, John Marek, at (206) 801-2432, or [jmarek@ci.shoreline.wa.us](mailto:jmarek@ci.shoreline.wa.us).

(For additional information about the program, visit: <http://www.cityofshoreline.com/cityhall/projects/trafficaction/index.cfm>)