



NEIGHBORHOOD TRAFFIC ACTION PLAN TRAFFIC PROBLEM

Please use this form to identify your specific traffic concern or issue. Use a separate form for each issue. Include your name and phone number so that we may contact you for further clarification or follow-up.

Name: _____ **Neighborhood:** _____

Street Address: _____

Phone Number: _____

Problem Location: (Street address and nearest cross street if possible) _____

Description of Traffic Problem: _____

Item which best describes this problem (circle): Lack of Signage Vegetation
Excessive Speed Cut-Through Traffic Pedestrian Issue Bicycle Issue Other

For more information, contact Associate Traffic Engineer, John Marek, at (206) 546-4223, or jmarek@ci.shoreline.wa.us.