CITY OF SOUTH BEND
DEPARTMENT OF PUBLIC WORKS
DIVISION OF ENGINEERING

TRAFFIC SERVICE REQUEST INTAKE FORM

DATE: _____
REQUEST TAKEN BY: _____
311 CALL ID: _____
REQUESTED BY: _____
ADDRESS: _____
E-MAIL: _____
TELEPHONE: _____
LOCATION OF ISSUE: _____

TYPE OF ISSUE:

- ☐ ADA Compliance (Report Issues with ADA Compliance)
- ☐ Bicycle - Request Addition or Revision of Bicycle Lane
- ☐ Intersection Control (Request Changes at an Intersection)
- ☐ Parking (Request Revision to On-Street Parking Signage)
- ☐ Pavement Markings (Request Revision or Addition of Road Markings)
- ☐ Pedestrian (Request Changes to Crosswalk or Walk Signals)
- ☐ Regulatory Sign (Addition or Revision of Regulatory Sign (Stop, Yield, etc.)
- ☐ School Zone (Request Changes in a School Zone)
- ☐ Sight Distance (Report Limited Sight on Road)
- ☐ Signal Timing or Configuration (Request Revision to Traffic Signal Timing)
- ☐ Speeding (Report Frequent Speeding)
- ☐ Traffic Flow Modification (Request Change to Lanes - Not in Intersection)

DESCRIPTION OF ISSUE: _____

Thank you for submitting a traffic service request. Please note that depending on the nature of the request it may take several weeks to return a response, since traffic counts, speed studies, and warrant investigations are required for proper evaluation of the issue(s).

Submit form to:

trafficrequest@southbendin.gov

or come in to 227 West Jefferson Blvd Suite 1316

or call 574-235-9251

For Office Use Only

Information logged in Traffic Service Requests *SmartSheet*®? ___Yes ___No

Assigned Traffic Service Request Number: TR _____-_____

→ Please provide requester with a copy of this completed form.