

Traffic Calming Request Form

Date of Request: _____ Submitted By (Print Name): _____

East Whiteland Township developed a traffic calming review process for consideration of traffic calming solutions within residential areas along public roads owned and maintained by East Whiteland Township. Please contact the Township for a copy of the traffic calming review process for more information.

East Whiteland Township will consider the need for traffic calming based on criteria described in the overall review process, which includes, but is not limited to, the following:

1. The street is located in an area zoned residential and/or the land uses along the street is mostly residential in nature.
2. The street is classified as a minor collector, local distributor, or local road according to the Township’s Roadway Functional Classification Map.
3. The posted speed limit is 35 mph or less.
4. The street is owned and maintained by the Township.

Use this form to initiate a traffic calming request with the Township in accordance with the Township’s traffic calming review process. The Township will respond to your request within ten business days after the first available meeting of the Township’s Traffic Committee in which this matter is discussed, subject to scheduling of the Traffic Committee agenda. The Traffic Committee may deny the request in favor of measures other than traffic calming. If the request for traffic calming is accepted, then the Traffic Committee will guide the traffic calming process. Please return this form to the East Whiteland Police Department, 209 Conestoga Road, Malvern, PA 19355.

Neighborhood Group Contact Information

Provide the contact information for the neighborhood group making this request for traffic calming. A neighborhood group must consist of a minimum of three affected property owners within the neighborhood.

Name	Physical Address	Email Address	Phone Number	Primary Contact (Yes/No)?

Traffic Calming Request Form

Date of Request: _____

Submitted By (Print Name): _____

Describe the Condition

Please provide information below to describe the specific intersection(s) or road segment(s) that is the subject of this request.

1. _____ from _____ to _____
Street or Intersection Cross Street Cross Street

Posted Speed Limit

Comments:

2. _____ from _____ to _____
Street or Intersection Cross Street Cross Street

Posted Speed Limit

Comments:

3. _____ from _____ to _____
Street or Intersection Cross Street Cross Street

Posted Speed Limit

Comments:

Please attach additional pages to share more detailed information. If possible, include a captioned map and photos to describe the situation. Also, when providing the information, please consider the following questions to help us better understand the situation.

1. Is this related to a vehicle speeding condition?
2. Is this related to a neighborhood cut-through traffic issue?
3. Is this related to a specific type of traffic (such as truck traffic)?
4. Does the issue occur during a specific time of day?
5. Is the issue related to pedestrians and/or bicyclists?
6. Is there a need for traffic control improvements (such as traffic signals, stop signs, etc.)?
7. Is there a visibility or sight distance issue?
8. Is this related to pavement conditions or other features along the road?