IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

AT TWO LOCATIONS IN THE CITY OF LOS ANGELES:

1) FROM EASTBOUND RODEO DRIVE ON TO SOUTHBOUND LENAWEE AVENUE;

AND

2) FROM EASTBOUND BOWCROFT STREET ON TO SOUTHBOUND LENAWEE AVENUE

TO DECREASE CUT-THROUGH TRAFFIC TO SOUTHBOUND LA CIENEGA AVENUE, VIA LENAWEE AVENUE AND WRIGHTCREST DRIVE

We, the undersigned residents of Blair Hills Neighborhood, represented in the processing of this Petition by the elected neighborhood board, and whose authorized representative for purpose of communicating with Public Works' Engineering Division is a member of the board and resident of the Blair Hills Neighborhood:

Name:
Гelephone:
E-mail address:
Home address:

Rev. 10-17-16	Page 1 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

The named representative coordinates with, and takes his/her direction from official votes of the neighborhood board, and is charged with communicating the board's official direction, related to this petition. The board, in its votes and direction, reflects the direction from the majority representation of the residents of the neighborhood at noticed meetings.

TRAFFIC CUT-THROUGH CONCERN

Commuter traffic on eastbound Jefferson Boulevard-Rodeo Drive encounters congestion during the weekday afternoon peak-period of 4 pm to 7 pm. Seeking to shorten their time spent in congested traffic, drivers are turning right onto Lenawee Avenue, and entering into the Blair Hills Neighborhod, and then turning left on Wrightcrest Drive, and then right onto southbound La Cienega Avenue. By taking this route, commuters bypass the congested arterial network, but create a reduction of quality of life for the residents of the Blair Hills Neighborhood due to the large and increasing number of commuters taking this residential route.

PROPOSED SOLUTION

In a meeting of board members, some residents, and the developer of the large parcel at the bend of Lenawee Avenue, with representatives of the Police Department, Fire Department, and Public Works' Engineering Division, several ideas to prevent cutthrough traffic were discussed. Among them, prohibiting left turns from southbound Lenawee Avenue onto eastbound Wrightcrest Drive, and the closure of the eastbound Wrightcrest Drive to southbound La Cienega Avenue exit. After consideration, the Blair Hills representatives agreed to not pursue these ideas because of concerns over creating unintended circumventing cut-through routes and excessive speeding, as well as over safety in case of an emergency, respectively.

	I	
Rev. 10-17-16	Page 2 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

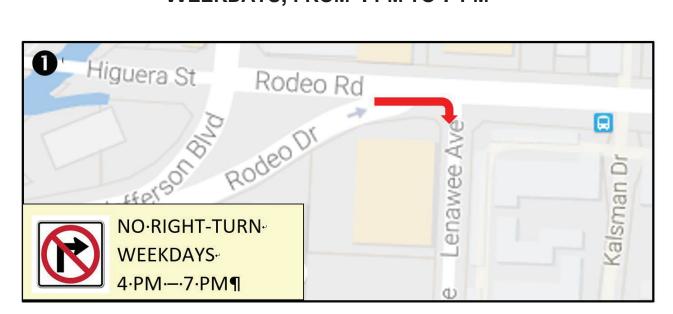
However, the Blair Hills representatives supported an idea to prohibit right-turn traffic movements at two intersections in the City of Los Angeles, immediately north of our neighborhood, and thereby address the cut-through traffic before it enters into the neighborhood. See the graphic below.



Cut-through commuter traffic enters the Blair Hills Neighborhood, primarily, by turning right from Rodeo Drive or from Bowcroft Street, and then proceeding southbound on Lenawee Avenue. If the right-turn movement is prohibited on weekday afternoons during the traffic peak-periods, between 4 pm to 7 pm, most of the cut-through traffic would be prevented. See the following graphics.

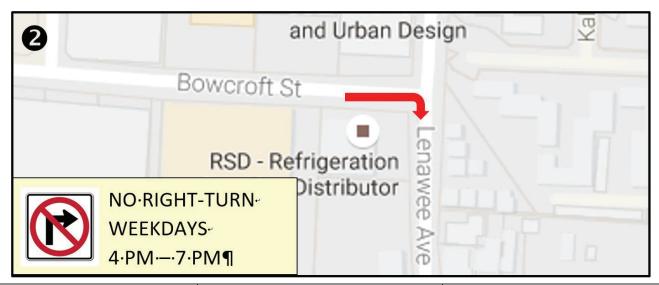
Rev. 10-17-16	Page 3 of 72	Date submitted to City:

In Support of the Installation of Right-Turn Prohibitions Weekdays, from 4 pm to 7 pm



Cut-through traffic entering from Rodeo Drive by turning right on to southbound Lenawee Avenue, and subsequently entering the Blair Hills Neighborhood, would be prohibited from making the right turn during weekdays, from 4 pm to 7 pm.

Also, cut-through traffic entering from Jefferson Boulevard/Holdrege Avenue onto Bowcroft Street, and then turning right onto southbound Lenawee Avenue, and subsequently entering the Blair Hills Neighborhood, would be prohibited from making the right turn during weekdays, from 4 pm to 7 pm. See the graphic below.



IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

IMPACT TO RESIDENTS

The turn restrictions cannot be applied only to commuter traffic. Such limited and selective application is not permitted by law. They must be applied to all traffic.

Any residents returning home to the Blair Hills Neighborhood during weekdays, 4 pm to 7 pm, would also NOT be able to turn right at the two proposed intersections.

Residents would be required to continue eastbound to La Cienega Boulevard, and turn right, and then enter the Blair Hills Neighborhood via Wrightcrest Drive. See the dashed red line in the adjacent map.



JURISDICTIONAL CHALLENGE

The locations proposed for posting right-turn prohibitions are located in the City of Los Angeles, and Culver City does not have jurisdiction to consider the proposed solution. However, Culver City's Traffic Engineering staff communicated to the City of Los Angeles the cut-through traffic situation being experienced by the Blair Hills Neighborhood, and asked for their consideration. The City of Los Angeles Department of Transportation is willing to install the right-turn restrictions, if their conditions are met.

Rev. 10-17-16	Page 5 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

THE PROCESS TO FOLLOW

The process to follow is in two phases:

The first phase requires that the Blair Hills residents show their support for the proposed solution by signing this petition. Because the right-turn restrictions proposal is part of an on-going effort as part of Culver City's Neighborhood Traffic Management Program (NTMP), the rules contained in the NTMP apply. The City Council-adopted NTMP regulations are appended to this petition.

The NTMP regulations, in typical situations, require an Advisory Card response (a card that records household's written opinion – in favor or against -- on the proposals at hand), with 1) a minimum required participation (return rate) of 50% of the households plus one additional household; and 2) that of these 50% + 1, a minimum of 75% of the respondents shall be in favor of the proposal, for it to pass the neighborhood support test.

However, this is not a typical situation, as indicated previously: 1) an Advisory Card is not being used, in deference to a petition form (based on previous experience in the Blair Hills Neighborhood, Advisory Cards have been an ineffective method to gauge households' opinion due to low return rate). In order to give this proposal the best chance for consideration by the neighborhood, a petition form was chosen; and 2) Advisory Cards record "support" and "against" positions, but a petition does not record "against" positions, since the refusal to sign is the equivalent. Therefore, applying the NTMP minimum "support" requirement indicated previously, 75% of 50% of the households plus one more – that is 75% x (50% households +1 household) -- shall be the minimum required number of supporting households to pass the neighborhood support test for the proposed right-turn restrictions – one signature per household.

Rev. 10-17-16	Page 6 of 72	Date submitted to City:
1001/10	F 495 0 01 / 2	I Date subliffice to City.

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

The second phase is a requirement from the City of Los Angeles Department of Transportation (LADOT), and is contingent upon meeting the requirements of phase one: A supermajority of the businesses and residents in the City of Los Angeles, in the area potentially affected by the turn restrictions, shall support the installation of the two proposed right-turn restriction installations, for the City of Los Angeles' support test to be met.

To pursue meeting this condition from the City of Los Angeles, after phase one has been met, Culver City staff will provide the Blair Hills Neighborhood representative named on page one, a petition form from the City of Los Angeles. The circulation of the City of Los Angeles' petition shall be coordinated by the Blair Hills Neighborhood representative.

After the City of Los Angeles' petition has been circulated and submitted to Culver City's Traffic Engineering staff, Culver City will present the petition to LADOT for their validation and consideration. Upon hearing the results of LADOT's consideration, Culver City staff will inform the Blair Hills representative.

If the LADOT's support criterion is met, LADOT will install the right-turn restriction signs, since the locations are in the City of Los Angeles right-of-way.

POLICE ENFORCEMENT

If the proposal is successful and meets the requirements under both phases, police enforcement will be occasional. Since the two locations are in the City of Los Angeles, their enforcement personnel will enforce. However, additionally, the Culver City Police Department representative who attended the meeting mentioned previously, indicated

Rev. 10-17-16	Page 7 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

that Culver City will also enforce the turn restrictions, even though they are located in the City of Los Angeles.

CITY COUNCIL CONSIDERATION

If phase one and two are met, Culver City will proceed as indicated by the City of Los Angeles. However, if Blair Hills' qualifying petition to the City of Los Angeles can be enhanced by formal support from the City Council of Culver City, Traffic Engineering staff will schedule requesting support from our City Council in a formal meeting.

SIGNING THE PETITION

By signing the Petition, I acknowledge that I have received from the Neighborhood Representative named on page one (or from another resident collaborating with him/her), the following documents and that I have read them and considered the proposals:

- 1) This petition text and signature pages; and
- 2) The Neighborhood Traffic Management Program (NTMP) Procedures Manual; and
- 3) Any other relevant material provided by the City to the Neighborhood Representative.

Rev. 10-17-16	Page 8 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

DAYTME PHONE:	(SIGNAT	URE SPACE NO. 1 IS FOR NEIG	HBORHOOD REPRESENTATIVE)		
DOTE: COMPLETE ADDRESS SIGNATURE	1	FIRST NAME	LAST	DAYTIME PHONE:	
SIGNATURE SIGN		COMPLETE ADDRESS		ZIP CODE	
DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS SIGNATURE DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS SIGNATURE BMAIL ADDRESS SIGNATURE		EMAIL ADDRESS		SIGNATURE	•
MM DDYY EMAIL ADDRESS SIGNATURE	2	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
3 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 4 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A PROPERTY OWNER D DDYY EMAIL ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT OWNER D DDYY EMAIL ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT OWNER D DDYY EMAIL ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS 5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DA		COMPLETE ADDRESS		ZIP CODE	
DATE: COMPLETE ADDRESS EMAIL ADDRESS	DDYY	EMAIL ADDRESS		SIGNATURE	
DATE: COMPLETE ADDRESS EMAIL ADDRESS					
MM OWNER OWNER DAYTIME PHONE:	3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
A FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS EMAIL ADDRESS SIGNATURE DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS DAYTIME PHONE: I AM A TENANT OWNER DATE: COMPLETE ADDRESS SIGNATURE EMAIL ADDRESS SIGNATURE EMAIL ADDRESS SIGNATURE		COMPLETE ADDRESS		ZIP CODE	_
DATE: COMPLETE ADDRESS EMAIL ADDRESS EMAIL ADDRESS EMAIL ADDRESS SIGNATURE DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS EMAIL ADDRESS SIGNATURE DAYTIME PHONE: I AM A PROPERTY OWNER DAYTIME PHONE: I AM A TENANT OWNER DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS SIGNATURE DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS EMAIL ADDRESS SIGNATURE DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS SIGNATURE DAYTIME PHONE: I AM A PROPERTY OWNER DOWNER DAYTIME PHONE: I AM A PROPERTY OWNER DAYTIME PHONE: I AM A PROPERTY OWNER SIGNATURE	DDYY	EMAIL ADDRESS		SIGNATURE	-
DATE: COMPLETE ADDRESS EMAIL ADDRESS EMAIL ADDRESS EMAIL ADDRESS SIGNATURE DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS EMAIL ADDRESS SIGNATURE DAYTIME PHONE: I AM A PROPERTY OWNER DAYTIME PHONE: I AM A TENANT OWNER DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS SIGNATURE DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS EMAIL ADDRESS SIGNATURE DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS SIGNATURE DAYTIME PHONE: I AM A PROPERTY OWNER DOWNER DAYTIME PHONE: I AM A PROPERTY OWNER DAYTIME PHONE: I AM A PROPERTY OWNER SIGNATURE					
MM SIGNATURE S	4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT □
5 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS EMAIL ADDRESS SIGNATURE DAYTIME PHONE: I AM A PROPERTY OWNER DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER EMAIL ADDRESS SIGNATURE		COMPLETE ADDRESS		ZIP CODE	
DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER OWNER DAYTIME PHONE: I AM A TENANT OWNER DAYTIME PHONE: I AM A TENANT OWNER DATE: COMPLETE ADDRESS ZIP CODE I AM A TENANT OWNER DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER SIGNATURE	DDVV	EMAIL ADDDDGG			
DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER OWNER DAYTIME PHONE: I AM A TENANT OWNER DAYTIME PHONE: I AM A TENANT OWNER DATE: COMPLETE ADDRESS ZIP CODE I AM A TENANT OWNER DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER SIGNATURE	אאטט	EMAIL ADDRESS		SIGNATURE	
MM	אאטט	EMAIL ADDRESS		SIGNATURE	
6 FIRST NAME LAST DAYTIME PHONE: I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER EMAIL ADDRESS SIGNATURE			LAST		I AM A TENANT
DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER EMAIL ADDRESS SIGNATURE	5 DATE:	FIRST NAME	Last	DAYTIME PHONE:	I AM A PROPERTY
DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER EMAIL ADDRESS SIGNATURE	5 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A PROPERTY
MM OWNER OWNER EMAIL ADDRESS SIGNATURE	5 DATE:	FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS		DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DDYY EMAIL ADDRESS SIGNATURE	5 DATE: MM DDYY	FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A PROPERTY OWNER I AM A TENANT
	5 DATE: MM DDYY 6 DATE:	FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY

Page 9 of 72

Date submitted to City:

Rev. 10-17-16

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NE	IGHBORHOOD KEPRESENTA	TIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	-
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			-	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			•	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	<u> </u>
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 10 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD REPRESENTATIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT □
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY

Page 11 of 72

Date submitted to City:

Rev. 10-17-16

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEI	GHBORHOOD REPRESENTA	TIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	-
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
			-	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 12 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD KEPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Page 13 of 72

Date submitted to City:

Rev. 10-17-16

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR	(NEIGHBORHOOD REPRESEN!	TATIVE)	
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			-	
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
5	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	
MM				OWNER
MM	EMAIL ADDRESS FIRST NAME	LAST	SIGNATURE DAYTIME PHONE:	OWNER I AM A TENANT
MM DDYY	EMAIL ADDRESS	LAST	SIGNATURE	OWNER
MM DDYY 6 DATE:	EMAIL ADDRESS FIRST NAME	LAST	SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY

Rev. 10-17-16	Page 14 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE No. 1 IS FOI	R NEIGHBORHOOD REPRESEN	IAIIVE)	
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT

Rev. 10-17-16	Page 15 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD REPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT \Box
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	Last	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		Last		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	Last	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT

Rev. 10-17-16	Page 16 of 72	Date submitted to City:

In Support of the Installation of Right-Turn Prohibitions Weekdays, from 4 pm to 7 pm

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNATURE SPACE NO. 1 IS FOR NEIGHBORHOOD REPRESENTATIVE) DAYTIME PHONE: I AM A TENANT COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER \square MM SIGNATURE EMAIL ADDRESS **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 3 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 4 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 5 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \Box MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 6 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY**

Rev. 10-17-16	Page 17 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE No. 1 IS FOI	R NEIGHBORHOOD REPRESEN	IAIIVE)	
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT

Rev. 10-17-16	Page 18 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	URE SPACE NO. 1 IS FOR NEIGI	HBORHOOD REPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
			•	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT

Rev. 10-17-16	Page 19 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR	K NEIGHBORHOOD REPRESEN!	ΓATIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			-	
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
5	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	
MM				OWNER
MM	EMAIL ADDRESS FIRST NAME	LAST	SIGNATURE DAYTIME PHONE:	OWNER I AM A TENANT
MM DDYY	EMAIL ADDRESS	LAST	SIGNATURE	OWNER
MM DDYY 6 DATE:	EMAIL ADDRESS FIRST NAME	LAST	SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY

Rev. 10-17-16	Page 20 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF **RIGHT-TURN PROHIBITIONS** WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNATURE SPACE NO. 1 IS FOR NEIGHBORHOOD REPRESENTATIVE) DAYTIME PHONE: I AM A TENANT COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 3 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 4 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME DAYTIME PHONE: LAST I AM A TENANT 5 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \Box MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 6 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY**

Page 21 of 72

Date submitted to City:

Rev. 10-17-16

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEI	GHBORHOOD REPRESENTAT	IIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			-	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
-				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 22 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD REPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
-				
4	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	Last	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY

Page 23 of 72

Date submitted to City:

Rev. 10-17-16

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEI	GHBORHOOD REPRESENTAT	IIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			-	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
-				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 24 of 72	Date submitted to City:

In Support of the Installation of Right-Turn Prohibitions Weekdays, from 4 pm to 7 pm

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNATURE SPACE NO. 1 IS FOR NEIGHBORHOOD REPRESENTATIVE) DAYTIME PHONE: I AM A TENANT COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER \square MM SIGNATURE EMAIL ADDRESS **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 3 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 4 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 5 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \Box MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 6 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY**

Rev. 10-17-16	Page 25 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIGH	BORHOOD REPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 26 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	ure Space No. 1 is for Nei	GHBORHOOD KEPRESENTAT	IVE)	
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	,	ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	-
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	·	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	-
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 27 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD REPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT \Box
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	Last	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		Last		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	Last	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT

Rev. 10-17-16	Page 28 of 72	Date submitted to City:

In Support of the Installation of Right-Turn Prohibitions Weekdays, from 4 pm to 7 pm

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNATURE SPACE NO. 1 IS FOR NEIGHBORHOOD REPRESENTATIVE) DAYTIME PHONE: I AM A TENANT COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER \square MM SIGNATURE EMAIL ADDRESS **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 3 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 4 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 5 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \Box MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 6 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY**

Rev. 10-17-16	Page 29 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NE	IGHBORHOOD KEPRESENTA	TIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	,	ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	-
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
-			•	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 30 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEI	GHBORHOOD REPRESENTAT	IIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			-	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
-				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 31 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIGH	BORHOOD REPRESENTATIVE)		
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT

Rev. 10-17-16	Page 32 of 72	Date submitted to City:

In Support of the Installation of Right-Turn Prohibitions Weekdays, from 4 pm to 7 pm

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNATURE SPACE NO. 1 IS FOR NEIGHBORHOOD REPRESENTATIVE) DAYTIME PHONE: I AM A TENANT COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER \square MM SIGNATURE EMAIL ADDRESS **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 3 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 4 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 5 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \Box MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 6 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY**

Rev. 10-17-16	Page 33 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NE	EIGHBORHOOD REPRESENT	Alive)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	,	ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	'	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME Complete Address	LAST	DAYTIME PHONE: ZIP CODE	<u> </u>
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 34 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD REPRESENTATIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Page **35** of **72**

Date submitted to City:

Rev. 10-17-16

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	URE SPACE NO. 1 IS FOR NEIG	GHBORHOOD REPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	-
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
			<u>'</u>	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT

Rev. 10-17-16	Page 36 of 72	Date submitted to City:

In Support of the Installation of Right-Turn Prohibitions Weekdays, from 4 pm to 7 pm

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNATURE SPACE NO. 1 IS FOR NEIGHBORHOOD REPRESENTATIVE) DAYTIME PHONE: I AM A TENANT COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 3 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 4 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME DAYTIME PHONE: LAST I AM A TENANT 5 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \Box MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 6 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY**

Page 37 of 72

Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE No. 1 IS FOI	R NEIGHBORHOOD REPRESEN	IAIIVE)		
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE	•	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE	•	
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE		
_					
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT	
DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER	
DATE:		LAST		I AM A PROPERTY	
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY	
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY	
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER	
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY	
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER	
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT	
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER	
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT	

Rev. 10-17-16	Page 38 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR	(NEIGHBORHOOD REPRESEN!	TATIVE)	
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			-	
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
5	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	
MM				OWNER
MM	EMAIL ADDRESS FIRST NAME	LAST	SIGNATURE DAYTIME PHONE:	OWNER I AM A TENANT
MM DDYY	EMAIL ADDRESS	LAST	SIGNATURE	OWNER
MM DDYY 6 DATE:	EMAIL ADDRESS FIRST NAME	LAST	SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY

Rev. 10-17-16	Page 39 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE No. 1 IS FOI	R NEIGHBORHOOD REPRESEN	IAIIVE)		
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE	•	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE	•	
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE		
_					
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT	
DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER	
DATE:		LAST		I AM A PROPERTY	
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY	
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY	
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER	
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY	
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER	
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT	
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER	
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT	

Rev. 10-17-16	Page 40 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE No. 1 IS FOI	R NEIGHBORHOOD REPRESEN	IAIIVE)		
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE	•	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE	•	
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE		
_					
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT	
DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER	
DATE:		LAST		I AM A PROPERTY	
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY	
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY	
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER	
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY	
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER	
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT	
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER	
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT	

Rev. 10-17-16	Page 41 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE No. 1 IS FOI	R NEIGHBORHOOD REPRESEN	IAIIVE)		
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE	•	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE	•	
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE		
_					
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT	
DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER	
DATE:		LAST		I AM A PROPERTY	
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY	
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY	
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER	
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY	
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER	
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT	
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER	
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT	

Rev. 10-17-16	Page 42 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD KEPRESENTATIVE))	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	,	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT

Page **43** of **72**

Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIGH	BORHOOD REPRESENTATIVE)		
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT

Rev. 10-17-16	Page 44 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIGH	BORHOOD REPRESENTATIVE)		
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 45 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD KEPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT

Page **46** of **72**

Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD KEPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT

Page 47 of 72

Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR	(NEIGHBORHOOD REPRESEN!	TATIVE)	
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			-	
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
5	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	
MM				OWNER
MM	EMAIL ADDRESS FIRST NAME	LAST	SIGNATURE DAYTIME PHONE:	OWNER I AM A TENANT
MM DDYY	EMAIL ADDRESS	LAST	SIGNATURE	OWNER
MM DDYY 6 DATE:	EMAIL ADDRESS FIRST NAME	LAST	SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY

Rev. 10-17-16	Page 48 of 72	Date submitted to City:

In Support of the Installation of Right-Turn Prohibitions Weekdays, from 4 pm to 7 pm

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNATURE SPACE NO. 1 IS FOR NEIGHBORHOOD REPRESENTATIVE) DAYTIME PHONE: I AM A TENANT COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 3 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 4 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME DAYTIME PHONE: LAST I AM A TENANT 5 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \Box MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 6 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY**

Page 49 of 72

Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE No. 1 IS FOI	R NEIGHBORHOOD REPRESEN	IAIIVE)	
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			•	
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT

Rev. 10-17-16	Page 50 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEI	GHBORHOOD REPRESENTAT	IIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			-	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
-				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 51 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	URE SPACE NO. 1 IS FOR NEIGH	BORHOOD REPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 52 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF **RIGHT-TURN PROHIBITIONS** WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNATURE SPACE NO. 1 IS FOR NEIGHBORHOOD REPRESENTATIVE) DAYTIME PHONE: I AM A TENANT COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 3 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 4 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME DAYTIME PHONE: LAST I AM A TENANT 5 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \Box MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 6 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY**

Page 53 of 72

Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE No. 1 IS FOI	R NEIGHBORHOOD REPRESEN	IAIIVE)	
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT

Rev. 10-17-16	Page 54 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIGH	BORHOOD REPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 55 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	URE SPACE NO. 1 IS FOR NEIGH	BORHOOD REPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A TENANT I AM A PROPERTY

Rev. 10-17-16	Page 56 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF **RIGHT-TURN PROHIBITIONS** WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNATURE SPACE NO. 1 IS FOR NEIGHBORHOOD REPRESENTATIVE) DAYTIME PHONE: I AM A TENANT COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 3 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 4 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME DAYTIME PHONE: LAST I AM A TENANT 5 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \Box MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 6 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY**

Page 57 of 72

Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD KEPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT

Page **58** of **72**

Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD KEPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT

Page **59** of **72**

Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIGH	BORHOOD REPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 60 of 72	Date submitted to City:

In Support of the Installation of Right-Turn Prohibitions Weekdays, from 4 pm to 7 pm

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNATURE SPACE NO. 1 IS FOR NEIGHBORHOOD REPRESENTATIVE) DAYTIME PHONE: I AM A TENANT COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER \square MM SIGNATURE EMAIL ADDRESS **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 3 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 4 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 5 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \Box MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 6 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY**

Rev. 10-17-16	Page 61 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEI	GHBORHOOD REPRESENTAT	IIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			-	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
-				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 62 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR NEI	GHBORHOOD REPRESENTAT	IIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
			-	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
-				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 63 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	URE SPACE NO. 1 IS FOR NEIG	HBORHOOD REPRESENTATIVE)		
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A TENANT I AM A PROPERTY OWNER I AM A PROPERTY I AM A TENANT I AM A TENANT I AM A TENANT

Rev. 10-17-16	Page 64 of 72	Date submitted to City:

In Support of the Installation of Right-Turn Prohibitions Weekdays, from 4 pm to 7 pm

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNATURE SPACE NO. 1 IS FOR NEIGHBORHOOD REPRESENTATIVE) DAYTIME PHONE: I AM A TENANT COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER \square MM SIGNATURE EMAIL ADDRESS **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 3 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 4 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 5 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \Box MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 6 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY**

Rev. 10-17-16	Page 65 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD REPRESENTATIVE)		
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT □
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY

Page **66** of **72**

Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIC	GHBORHOOD KEPRESENTATIVE	2)	
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	Complete Address		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
-				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT

Page **67** of **72**

Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE No. 1 IS FOI	R NEIGHBORHOOD REPRESEN	IAIIVE)	
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	1	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT

Rev. 10-17-16	Page 68 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF **RIGHT-TURN PROHIBITIONS** WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNATURE SPACE NO. 1 IS FOR NEIGHBORHOOD REPRESENTATIVE) DAYTIME PHONE: I AM A TENANT COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT DATE: COMPLETE ADDRESS ZIP CODE I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 3 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** DAYTIME PHONE: FIRST NAME LAST I AM A TENANT 4 COMPLETE ADDRESS ZIP CODE I AM A PROPERTY DATE: OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME DAYTIME PHONE: LAST I AM A TENANT 5 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \Box MM EMAIL ADDRESS SIGNATURE **DDYY** FIRST NAME Last DAYTIME PHONE: I AM A TENANT 6 COMPLETE ADDRESS ZIP CODE DATE: I AM A PROPERTY OWNER \square MM EMAIL ADDRESS SIGNATURE **DDYY**

Page 69 of 72

Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE No. 1 IS FOI	R NEIGHBORHOOD REPRESEN	IAIIVL)	
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS	,	ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	•
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	-
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME Complete Address	LAST	DAYTIME PHONE: ZIP CODE	I AM A TENANT I AM A PROPERTY OWNER
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT

Rev. 10-17-16	Page 70 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

(SIGNAT	TURE SPACE NO. 1 IS FOR	(NEIGHBORHOOD REPRESEN!	TATIVE)		
1	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE	•	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER	
DDYY	EMAIL ADDRESS		SIGNATURE		
3	FIRST NAME	Last	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □	
DDYY	EMAIL ADDRESS		SIGNATURE		
_					
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □	
DDYY	EMAIL ADDRESS		SIGNATURE	SIGNATURE	
5	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT	
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER	
	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE		
MM				OWNER	
MM	EMAIL ADDRESS FIRST NAME	LAST	SIGNATURE DAYTIME PHONE:	OWNER I AM A TENANT	
MM DDYY	EMAIL ADDRESS	LAST	SIGNATURE	OWNER	
MM DDYY 6 DATE:	EMAIL ADDRESS FIRST NAME	LAST	SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY	

Rev. 10-17-16	Page 71 of 72	Date submitted to City:

IN SUPPORT OF THE INSTALLATION OF RIGHT-TURN PROHIBITIONS WEEKDAYS, FROM 4 PM TO 7 PM

PLEASE FILL OUT CLEARLY. ONE SIGNATURE SPACE PER RESIDENCE.

(SIGNAT	TURE SPACE NO. 1 IS FOR NEIG	HBORHOOD REPRESENTATIVE)	
1	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	EMAIL ADDRESS		SIGNATURE	
2	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER
DDYY	Email Address		SIGNATURE	
3	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
DATE:	COMPLETE ADDRESS		ZIP CODE	I AM A PROPERTY OWNER □
DDYY	EMAIL ADDRESS		SIGNATURE	
_				
4	FIRST NAME	LAST	DAYTIME PHONE:	I AM A TENANT
4 DATE:	FIRST NAME COMPLETE ADDRESS	LAST	DAYTIME PHONE: ZIP CODE	
DATE:		LAST		I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE:	COMPLETE ADDRESS	LAST	ZIP CODE	I AM A PROPERTY
DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS		ZIP CODE SIGNATURE	I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY I AM A TENANT I AM A PROPERTY
DATE: MM DDYY 5 DATE: MM	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME		ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT OWNER I AM A TENANT OWNER I AM A PROPERTY OWNER I AM A TENANT
DATE: MM DDYY 5 DATE: MM DDYY	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE	I AM A PROPERTY OWNER I AM A TENANT I AM A PROPERTY OWNER
DATE: MM DDYY 5 DATE: MM DDYY 6 DATE:	COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME COMPLETE ADDRESS EMAIL ADDRESS FIRST NAME	LAST	ZIP CODE SIGNATURE DAYTIME PHONE: ZIP CODE SIGNATURE DAYTIME PHONE:	I AM A TENANT I AM A PROPERTY OWNER I AM A TENANT OWNER I AM A TENANT OWNER I AM A TENANT I AM A TENANT

Page 72 of 72

Date submitted to City:



NEIGHBORHOOD TRAFFIC MANAGEMENT PROGRAM (NTMP) PROCEDURES MANUAL

The following procedures have been established as the City's NTMP process by the City Council effective November 22, 2004.

The following initials indicate who is responsible for completing the various Phases discussed below:

- "N" ACTIONS BY NEIGHBORHOOD.
- "C" ACTIONS BY CITY/ENGINEERING DIVISION.
- "NC" JOINT ACTION BY NEIGHBORHOOD AND CITY.

NTMP PROCESS:

I. PRELIMINARY CONTACT BY NEIGHBORHOOD

- COMMUNICATION FROM RESIDENTS PRESENTING NEIGHBORHOOD TRAFFIC PROBLEMS "N".
- PRELIMINARY REVIEW AND DATA GATHERING BY ENGINEERING DIVISION "C" The Engineering Division shall conduct an initial screening of the neighborhood's request to determine if the area qualifies for further NTMP review. In order to qualify the subject streets shall be reviewed for the following criteria:
 - ➤ Traffic Volumes: The subject street(s) carry between 1,000 and 3,000 vehicles per day. The Engineering Division may make exceptions for streets with volumes above or below that range for streets that, based on standard engineering judgment, are subject to special circumstances.; and,
 - ➤ Speeds: Only those streets that have measured critical speeds that exceed the speed limit by seven miles per hour or more may be considered for an NTMP process. (The "critical speed" is the speed at or below which 85% of the vehicles actually travel, as established by a radar or similar speed study.) Typically, the speed limit on residential streets is 25 miles per hour, but there are some local and neighborhood feeder streets with higher posted limits. The maximum posted speed limit for a street considered for traffic calming measures shall be 30 miles per hour.
 - In addition to the above criteria the Engineering Division, using standard engineering judgment, may also consider the following:
 - Accidents Reports: Those streets which have accident records approaching or exceeding the warrants defined in the State of California Caltrans Manual shall be considered for installation of traffic control and/or calming devices.
 - School Routes: Those streets which serve as an access route to any schools (public or private).

NTMP Procedures Manual Prepared by: Public Works Department/Traffic Engineering November 22, 2004 Page 2 of 4

- Physical Features: The geometry and/or topography of the subject street(s) may in standard engineering judgment support the need for consideration.
- IDENTIFY PRELIMINARY STUDY AREA "**NC**" Identify a preliminary study area including the street(s) requested by the neighborhood and any streets that may be impacted by cut-through traffic and/or potential traffic control measures. The Engineering Division may identify a study area larger then the area proposed by the residents if the additional area may be impacted by diverted traffic.
- IMPLEMENTATION OF INITIAL MEASURES TO TRY TO ADDRESS IMPACTS "NC"- Working with the neighborhood, it is the City's policy to consider enhanced enforcement and potentially install traffic controls, signage and/or striping in an effort to address verified traffic impacts before proceeding with the initiation of a formal NTMP process. If the initial measures do not sufficiently address the impacts, the City will continue to the NTMP process.

II. NEIGHBORHOOD'S REQUEST TO PARTICIPATE IN NTMP

- FINALIZE THE NTMP STUDY AREA "NC" Working with the neighborhood representatives, the Engineering Division will designate the study area that may be impacted by cut-through traffic and/or potential traffic control measures. The residents within this study area shall be notified of the proposed establishment of the NTMP process. Notice will also be provided to businesses located immediately adjacent to the study area.
- PETITION AMONG RESIDENTS OF STUDY AREA TO DETERMINE LEVEL OF AGREEMENT THAT PROBLEMS EXIST "N" Petition circulated by requesting individual or neighborhood group. Petition shall be signed by at least 50% + 1 of the total households in the study area. Petition shall be approved by the Engineering Division and must specifically identify the study area, detail the traffic impacts which are of concern and that the petition requests the City to initiate an NTMP process.

For neighborhoods in the City requesting the initiation of an NTMP process, which have gated residential developments, the individual duly designated Homeowners Association or Resident Association may sign the petition on behalf of their individual gated development, provided they submit written proof that they are authorized to act on the matter on behalf of the households in the development. Provided valid proof is submitted, each such development would then be considered as a single household for determining threshold support to initiate an NTMP request.

 CITY COUNCIL AUTHORIZATION TO PROCEED AND PRIORITY RANKING COMPARED WITH OTHER NTMP PROJECTS THROUGHOUT CITY "C" - Based on petition, preliminary data and relative severity of the impacts the Engineering Division will schedule for City Council consideration, a request to authorize, fund and prioritize the proposed NTMP process. NTMP Procedures Manual Prepared by: Public Works Department/Traffic Engineering November 22, 2004 Page 3 of 4

III. RESIDENTS' COMMITTEE

• PUBLIC MEETING AND RESIDENTS' COMMITTEE FORMATION "C" – The Engineering Division will mail an invitation to the whole neighborhood to participate in a meeting of area residents to discuss the NTMP and form a Residents' Committee. Information notice of neighborhood meetings will also be provided to businesses located immediately adjacent to the study area.

IV. PLAN DEVELOPMENT

- DEVELOPMENT OF TRAFFIC CONTROL PLAN "**NC**" The Engineering Division and Resident's Committee will work together at open public meetings to complete the steps in developing a proposed traffic control plan:
 - ➤ IDENTIFICATION OF PROBLEMS "NC" Assessment of problems.
 - QUANTIFICATION OF PROBLEMS -- "Before" Studies "C".
 - IDENTIFICATION OF NTMP OBJECTIVES "NC".
 - > TRAFFIC CALMING MEASURES "NC".
 - > DEVELOPMENT OF PLAN ALTERNATIVES "NC".

V. EVALUATION OF PROPOSED PLAN

 EVALUATION OF ALTERNATIVES AND SELECTION OF PROPOSED PLAN "NC" -Participation by Residents' Committee, all affected City Departments and Divisions, and other affected agencies.

VI. TRIAL INSTALLATION

ADVISORY SURVEY FOR TEST INSTALLATION OF PROPOSED PLAN "C" - The Engineering Division shall mail an advisory survey to all residents in the study area. The trial installation shall be supported by at least 60% of all those who participated and the total number of returned surveys shall represent at least 50% + 1 of the total households in the study area before the request for trial installation can be forwarded to the City Council for consideration.

For neighborhoods in the City requesting the trial installation, which have gated residential developments, the individual duly designated Homeowners Association or Resident Association may submit an advisory survey on behalf of their individual gated development, provided they submit written proof that they are authorized to act on the matter on behalf of the households in the development. Provided valid proof is submitted, each such development would then be considered as a single household for determining support for trial installation.

- REQUEST TO CITY COUNCIL FOR TRIAL INSTALLATION "NC" If the resident survey attains the required thresholds, the trial plan is sent to City Council for approval, modification, or rejection.
- TEST INSTALLATION "C" Engineering Division establishes success criteria for

NTMP Procedures Manual Prepared by: Public Works Department/Traffic Engineering November 22, 2004 Page 4 of 4

plan and test period of at least 3, but preferably at least 6 months.

- PROJECT EVALUATION "**NC**" City gathers data on "after" volumes, speeds, etc. and reviews them with residents' committee and other residents.
- NEIGHBORHOOD AGREEMENT "C" The Engineering Division mails an advisory survey to all affected residents to determine support for the permanent installation of NTMP measures. Residents shall express support on retaining or modifying the plan components, before the request for permanent installation is sent to City Council. The permanent installation shall be supported by at least 75% of all those who responded and the total number of returned surveys shall represent at least 50% + 1 of the total households in the study area.

For neighborhoods in the City requesting the initiation of an NTMP process, which have gated residential developments, the individual duly designated Homeowners Association or Resident Association may sign the petition on behalf of their individual gated development, provided they submit written proof that they are authorized to act on the matter on behalf of the households in the development. Provided valid proof is submitted, each such development would then be considered as a single household for determining threshold support to initiate an NTMP request.

VII. COUNCIL CONSIDERATION

REQUEST TO CITY COUNCIL FOR PERMANENT INSTALLATION "NC" - If the
resident survey attains the required thresholds, the plan is sent to City Council for
approval, modification, or rejection.

VIII. DESIGN AND CONSTRUCTION OF PERMANENT INSTALLATION

- ENGINEERING DESIGN OF PLAN "C".
- AWARDING OF CONTRACT OR WORK ORDER AND PLANS TO CITY CREW "C".
- CONSTRUCTION OF TRAFFIC CALMING MEASURES "C".

IX. MONITORING AND EVALUATION

- MONITORING AND EVALUATION --"After" Studies "NC" Periodic review by City
 of "after" volumes, speeds, accidents, with major evaluation and a public advisory
 survey 3 to 5 years after installation.
- MODIFICATION OF PLAN, if necessary "NC".

Modified on November 22, 2004.