



## CITY OF SAFETY HARBOR TRAFFIC CALMING PROGRAM

### PROJECT APPLICATION FORM:

Street Name: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Day Phone: \_\_\_\_\_

Local Address: \_\_\_\_\_ Date: \_\_\_\_\_

Do you have an active Homeowner's Association? ☐ Yes ☐ No

If you answered yes, you must have the endorsement of the Homeowner's Association

Name of Homeowner's Association \_\_\_\_\_

Describe the location of your traffic problem. Include the worst problem area and the effects of the problem. Include street names and any other pertinent information that will assist us in the understanding the problem

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Place a check mark next to all that apply. Include a brief description to help us better understand your problem.

☐ Speeding \_\_\_\_\_

☐ Traffic Volume \_\_\_\_\_

☐ Accidents \_\_\_\_\_

☐ Pedestrian Dangers \_\_\_\_\_

☐ Difficulty leaving/entering driveways or street \_\_\_\_\_

☐ Parking on the street \_\_\_\_\_

☐ Traffic Noise \_\_\_\_\_

☐ School Traffic \_\_\_\_\_

☐ Lack of Amenities (sidewalks, crosswalks, bike lanes) \_\_\_\_\_

☐ Other \_\_\_\_\_

Please return the completed application form to:

The City of Safety Harbor  
Engineering Department  
750 Main Street  
Safety Harbor, Florida 34695  
Telephone: 727-724-1555