



Rochester Hills Neighborhood Traffic Safety Program Traffic Information Survey



Contact Name: Allen Quail
(THIS IS THE PERSON THE CITY WILL CONTACT FOR FOLLOW UP)

Today's Date 11/02/2017

Address: 2686 Tallahassee

Day Phone: 248 652 0094

Neighborhood Judson Park

List names and phone number of the interested neighbors:

Nina Kelly 248-434-7564, Hayley & John Leichtman 248-659-8364, Jim & Pat Doherty 248-652-4675, Cecilia & Steve Strine 248-420-9646, Michael Dwyer 248-651-1918, Roger & Dawn Heiple 248-652-2985, JENNIFER BELANGER 248 650 3061, BRIAN ROBACK 248 652 4902, ROBERT EASTON 248 6598488, JAY & LIZ HOHAUSER 248-6506103, JEFF TOLL

Location(s) of Concern

Shenandoah Drive, Mohawk Lane, Roseview Drive, Tallahassee Drive, and Potomac Drive

What specific concerns have you identified with the above location?

Traffic going thru the subdivision to get around the traffic backup problem at the intersection of Adams and Tienken. The traffic traveling at well over the speed limit. We do not have sidewalks or street lights, children and adults walking them to schools are at risk.

Please identify the specific days and/or time periods that the traffic problem takes place.

(FOR EXAMPLE: WEEKDAYS FROM 4:00 P.M. TO 6:00 P.M.)

weekdays from 6:45 am to 7:30 am, 2:30pm to 3:00pm

What solutions do you feel would address your concerns? (Check one or more)

- | | | | |
|-------------------------------------|-------------------|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> | Brush Trimmings | <input type="checkbox"/> | Resident Speed Reduction Program |
| <input checked="" type="checkbox"/> | Signing | <input type="checkbox"/> | Neighborhood Traffic Safety Campaign |
| <input type="checkbox"/> | Pavement Markings | <input type="checkbox"/> | Speed Awareness Program |
| <input checked="" type="checkbox"/> | Enforcement | <input checked="" type="checkbox"/> | Other _____ |

Thank you for taking the time to fill out this Traffic Information Survey. Once we receive the form, you will be contacted by City staff to talk in more detail about the program.

FOR OFFICIAL USE ONLY

Date Received: _____ Project No: _____ Section: _____

Email form back to dps@rochesterhills.org