



TOWN OF
SAN ANSELMO
EST. 1907

Traffic Safety Request

This form is to request review of your transportation concern along a San Anselmo neighborhood public street.

Please fill out all sections and submit to:

Town of San Anselmo, Attn: Traffic Safety Committee, 525 San Anselmo Avenue, San Anselmo, CA 94940

Contact Person(s) Information Requested by:

Printed name: _____ Individual property owner or resident _____

Address: _____ Neighborhood / condo association _____

Phone: _____ Other interested group (specify): _____

Email: _____

Date: _____

Location of Concern

Please describe the location of concern, as well as the affected area (other streets, neighborhood).

Traffic and/or Safety Concern

Please describe the nature of the neighborhood traffic and/or safety issue you are concerned with.

Thank you. Additional Comments and/or Photo or Sketch

Provide attach any additional comments and/or a photograph or sketch , if necessary, to further explain concerns or suggested changes.

FOR TOWN OF SAN ANSELMO STAFF USE ONLY

Date request received: _____

Tracking number: _____

Action taken: _____

Action description: _____

Work order number and date (if applicable): _____

Applicant notified of outcome on: _____

Completed on: _____