

***Traffic Calming Request/Problem Report***  
***Lower Makefield Township Citizens Traffic Commission***

Name \_\_\_\_\_ Today's Date \_\_\_\_\_

Address \_\_\_\_\_ Daytime Phone \_\_\_\_\_

\_\_\_\_\_ Email \_\_\_\_\_

Alternate Contact Number:  Home  Cell \_\_\_\_\_

Location of Concern \_\_\_\_\_

What is/are your specific concern(s)? (Check one or more)

Safety     Vehicular Speed     Traffic Volume     Other

Please describe your traffic safety concern(s) and any observations:  
(Attach additional pages if necessary)

Has this concern been presented previously to the Citizens Traffic Commission?  
Yes or No If yes, approximate date \_\_\_\_\_

Thank you for taking the time to complete this form. Please return the completed form to the Citizens Traffic Commission; C/O, David W. Kratzer, Jr., Lower Makefield Township Manager, 1100 Edgewood Road, Yardley, PA 19067. Alternately you can return the completed form via email to [admin@lmt.org](mailto:admin@lmt.org).

**For Official Use Only**

Date Received:

Tracking Number:

Field Investigation:

Accidents:

Date(s) neighborhood contacted:

Traffic Study Date(s):

Solutions discussed/implemented (include dates):