

**City of Auburn Hills**

**TRAFFIC INFORMATION SURVEY**

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

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

Neighborhood/Subdivision: \_\_\_\_\_

List names & phone numbers of interested neighbors

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please identify the specific time periods that the traffic concern takes place

(For example form 4:00 p.m. To 6:00 p.m.) \_\_\_\_\_

\_\_\_\_\_

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

- Brush trimming/Corner clearing  Speed reduction devices
- Signing  Other
- Pavement markings  Police Enforcement

Thank you for taking the time to fill out the Traffic Information Survey. Once we receive this Survey, you will be contacted by City staff to establish a meeting date and location.

**FOR OFFICE USE ONLY**

Date Received: \_\_\_\_\_ Initial Meeting Date: \_\_\_\_\_

Return form to: Traffic Information Survey

City of Auburn Hills  
Department of Public Works  
1500 Brown Rd.  
Auburn Hills, MI 48326