Neighborhood Services
Traffic Calming Campaign

Thank you for your interest in participating in the city of Aurora Traffic Calming Campaign. Enclosed, you will find information and an application for conducting the campaign.

This program is designed to help encourage slower speeds and bring safety awareness to the attention of the neighborhood. As you meet with your neighbors to request permission to place the signs, you will share the traffic safety message and bring the need for slower speeds to others' attention.

Sign placement is the secondary part of the campaign. The more neighbors that have signs placed in their yards, the greater the messaging impact.

If you have any questions or concerns, please feel free to call 303.739.7280 to speak with one of our neighborhood liaisons. Thank you again for your willingness to encourage safety in your neighborhood. We value your concern for your community.

Malcolm Hankins, Director
Neighborhood Services Department
NEIGHBORHOOD SERVICES
TRAFFIC CALMING CAMPAIGN APPLICATION

Please provide us with some background information about the traffic problems in your neighborhood.

Street name/cross streets of area of concern: ___________________________________________

Is this a private or public street and/or within a covenant controlled area? ________________
If a school is involved, please provide school name: ______________________________________

Please describe the specific nature of your concern (i.e. days of the week, time of the day, specific vehicles, license plate #, etc.): __________________________________________

______________________________________________________________________________

______________________________________________________________________________

Please describe any actions taken or history about this issue (i.e. days of the week, time of the day, specific vehicles, whom you have spoken with regarding issue, etc.): ________________________________

______________________________________________________________________________

______________________________________________________________________________

Have you spoken with your Police Area Representative about this issue? □ Yes □ No

Have you spoken with any other city representative about this issue? □ Yes □ No

If yes, who? _____________________________ When? _____________________________

Name of Person and/or Department Approximate Date

What was the result of your conversation? __________________________________________

______________________________________________________________________________
**Campaign Manager Responsibilities:** This campaign is most effective with the support of a neighborhood champion who can encourage others to promote the idea. It will be necessary for you to communicate with your neighbors about the program. Your neighbors only need to agree to have you place the yard signs for up to eight days, and then collect them at the end of the campaign.

A minimum of two campaign managers are required from different addresses. Campaign managers must be a resident of the block and/or the neighborhood conducting the campaign. Remember, the success of the campaign depends on you. The city supports your efforts by providing yard signs and communication materials.

By providing your name below, you are agreeing to terms and conditions of the traffic calming campaign.

First Name: ___________________________  Last Name: ___________________________

House Number / Street: _______________________________________________________

Neighborhood Organization / Subdivision: _______________________________________

Phone: _______________________________

Email Address (Optional): ___________________________

**Co-Applicant Name and Address:** (Must be a resident of block and/or neighborhood conducting the campaign.)

First Name: ___________________________  Last Name: ___________________________

House Number / Street: _______________________________________________________

Neighborhood Organization / Subdivision: _______________________________________

Phone: _______________________________

Email Address (Optional): ___________________________
**PLEASE NOTE:** Two weeks advance notice is necessary for approval. Please select a date that is at least two weeks away from the day that you plan to turn the application in.

**Dates of Event:** (eight days total; beginning on a Saturday and ending on a Sunday)

Beginning Date: ______________

Ending Date: ______________

Draw the boundaries of your campaign in the following space. Indicate street names and cross streets. You may also attach a map of your neighborhood. Simply indicate on the map which streets you intend to conduct the campaign on.
Traffic Campaign Agreement

- I understand that the traffic calming campaign is a grassroots educational and awareness tool.

- I agree to communicate with my neighbors about the campaign and will receive permission from those neighbors who are interested in participating by collecting their address, name and signature.

- I will discuss the location of sign placement with the residents who have agreed to be a part of the campaign.

- I will be responsible for placing the campaign signs in yards and collecting them at the end of the eight-day period.

- Campaign signs will be placed according to city guidelines:
  - Signs must be solidly supported in the ground, and firmly attached to mounting devices.
  - Signs will not be attached to any traffic control device, directional or regulatory sign, or placed in the public right-of-way. Public right-of-way includes all street medians, visibility triangles (equilateral triangle areas at intersections extending approximately 30 feet from corner), and highway/street shoulders. Generally, right-of-way along highways and streets extends in toward the property approximately 10 feet from the curb, flow line or gutter.

- I will be responsible for collecting all campaign signs, and I will return them to the city building within three days after the event.

- If for any reason I am unable to return the signs within three days after the event, I will contact the department at 303.739.7280 and make other arrangements.

By signing below, I agree to the above terms.

__________________________________  _________________________
Lead Campaign Manager  Date

__________________________________  _________________________
Co-Campaign Manager  Date
Evidence of property owners' consent is required. Please fill out addresses of properties you will place a campaign sign on. Have property owner print name and provide signature on form below. This form will indicate that your neighbors have agreed to have signs placed in their yard for the eight-day campaign.

My signature and address provided below, indicate that I authorize __________________ and/or __________________

Lead Campaign Manager Name
Co-Campaign Manager Name

to place a temporary sign on my lawn for the traffic calming campaign for a total of eight days. The sign will be collected by the campaign manager at the end of the eight-day period.

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This letter stipulates that the ________________ Home Owners Association (HOA) is aware that the traffic calming campaign will be implemented for the dates of ________________ to ________________. This eight-day campaign will be led by:

__________________________  ____________________
Campaign Manager Name  Phone

__________________________  ____________________
Campaign Manager Name  Phone

The campaign managers will communicate with residents about the program and receive permission to place yard signs on neighborhood lawns. Upon completion of the eight-day campaign, campaign managers will remove yard signs and return them to the city.

The signature below indicates that a member of the HOA Board or their agent is aware of the campaign and has provided permission for residents to participate.

__________________________  ____________________
HOA Board Member or Agent Signature  Phone
THIS PAGE IS INTENTIONALLY BLANK
PLEASE SLOW DOWN

NEIGHBORHOOD SLOW ZONE

This sign is the property of the City of Aurora Traffic Calming Campaign. If found, please call 303-739-7280.
CITY STAFF WILL ROUTE AND REVIEW THIS APPLICATION

POLICE: Traffic Section
(   ) Recommend (   ) NOT Recommend

__________________________  ______________________  ______________________
Signature                  Date                        Signature

Please describe (if any) action/history taken to address concerns in this area:

POLICE: Police Area Representative (PAR) Sergeant and PAR Sector Lieutenant
(   ) Recommend (   ) NOT Recommend

__________________________  ______________________  ______________________
Signature                  Date                        Signature

Please describe (if any) action/history taken to address concerns in this area:

PUBLIC WORKS TRAFFIC ENGINEERING:
(   ) Recommend (   ) NOT Recommend

__________________________  ______________________  ______________________
Signature                  Date                        Signature

Please describe (if any) action/history taken to address concerns in this area:

NEIGHBORHOOD SERVICES:
(   ) Recommend (   ) NOT Recommend

__________________________  ______________________  ______________________
Signature                  Date                        Signature

Please describe (if any) action/history taken to address concerns in this area:
# Traffic Calming Campaign Survey

Please help us make this program better. Your feedback and suggestions are appreciated.

Please answer the following questions:

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<th>Neither</th>
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1. The traffic calming campaign process is customer service friendly.
2. Staff was helpful and knowledgeable.
3. The application process was easy.
4. The campaign was easy to implement.
5. As a result of the campaign I noticed slower traffic over time.
6. I am interested in conducting this campaign again.
7. I would recommend this campaign to others.

Please provide further information on any of the above statements you disagree with:

________________________________________________________________________

________________________________________________________________________

The campaign would be better if:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________