



THE VILLAGE OF  
**OAK LAWN**

<b>FOR OFFICE USE ONLY</b>
TC# _____
RECEIVED: _____
DISTRICT _____

## REQUEST FOR TRAFFIC CONTROL DEVICES

APPLICANT MUST COMPLETE ALL PORTIONS OF THIS APPLICABLE SECTION BEFORE THE REQUEST CAN BE CONSIDERED BY THE TRAFFIC REVIEW COMMITTEE. A SEPARATE REQUEST FOR TRAFFIC CONTROL DEVICES FORM MUST BE COMPLETED FOR EACH REQUEST SUBMITTED.

### MISCELLANEOUS REQUEST OTHER THAN STOP SIGN OR PARKING

**LIST SPECIFIC REQUEST:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**LIST IF / WHEN POLICE WERE NOTIFIED:** \_\_\_\_\_

\_\_\_\_\_

**REASON:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Use the reverse side of this form to obtain signatures from residents on the block who agree with your request.

**Person Making Request / Spokesperson:**

Name: \_\_\_\_\_

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

Phone #: \_\_\_\_\_

Return Completed Form To: Village of Oak Lawn  
Attn: Traffic Review Committee  
9446 Raymond Avenue  
Oak Lawn, Illinois 60453

