

**APPLICATION FOR TRAFFIC STUDY REVIEW**

<b>OFFICE USE ONLY</b>	
Petition No. _____	Fee: \$ _____
1 <sup>st</sup> Step Mtg Date: _____	EZ Fee: \$ _____
Methodology Mtg Date: _____	Receipt No. _____
Tax Map No. _____	
<b>Account No. 001-800-8050-4061</b>	

**CHECK ONE:**

Minor

Major

Submittal:  1st  2nd  3rd

The traffic study review fee includes a maximum of three reviews per development plan.

Owner(s) of Record (please print)	Applicant(s)/Agent(s) (please print)
Name:	Name:
Address:	Address:
E-mail:	E-mail:
Phone:                      Fax:	Phone:                      Fax:
<i>(If additional owners, please include on back)</i>	
PROJECT INFORMATION	
Project Name	
New Peak Hour Trips	AM =                      trips
	PM =                      trips
Proposed Uses <small>(list type; ITE land use code and number of units or square footage as appropriate)</small>	
Location and access	

I certify that the above statements are correct and true to the best of my knowledge.

\_\_\_\_\_  
 Applicant's signature

\_\_\_\_\_  
 Date

**Certified Cashier's Receipt:**