ROCK ISLAND
ILLINOIS

One Way Street Request

Residents that would like to change the traffic flow on their street to a one-way must submit a petition that must be signed by residents representing two-thirds (2/3) of the dwelling units in the proposed area.

CONTACT INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

E-Mail: _____

Where would you like the one-way street? (example: XX Street from XX Avenue to XX Avenue)

_____

Which direction would you like the one-way street?
(example: for north bound, south bound, east bound, or west bound traffic)

_____

List the reason for the request to make this a one-way street: (please give specific details)

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

One Way Street Request
Neighborhood Petition

NAME please print	ADDRESS please print

Please e-mail ALL PAGES of the One Way Street Request to pubworksmail@rigov.org
or mail to the City of Rock Island, Public Works Department, 1309 Mill Street, Rock Island, IL 61201.