

1316 COUNTY-CITY BUILDING
227 W. JEFFERSON BOULEVARD
SOUTH BEND, INDIANA 46601-1830



PHONE 574/ 235-9251
FAX 574/ 235-9171

CITY OF SOUTH BEND JAMES MUELLER, MAYOR
BOARD OF PUBLIC WORKS

August 27, 2024

Ms. Carrie Miller
702 S. 33rd St.
South Bend, IN 46615

RE: Request for Traffic Control Device – Handicapped Accessible Parking Space Sign

Dear Ms. Miller:

At its August 27, 2024 meeting, the Board of Public Works **approved** your request for the installation of a handicapped accessible parking space sign in front of your home at 702 S. 33rd St.

If you have any further questions, please call this office at (574) 235-9251.

Sincerely,

/s/ Theresa Heffner

Theresa Heffner, Clerk

Enclosures
TH/hh



BOARD OF PUBLIC WORKS

Request for Approval of Traffic Control Device(s)

Date: 8/8/2024

I hereby submit the following installation or change of traffic control devices for review:

<input checked="" type="checkbox"/> New Installation	<input type="checkbox"/> Removal	<input type="checkbox"/> Revision
<input type="checkbox"/> Stop Sign	<input type="checkbox"/> Stop Sign	<input type="checkbox"/> Stop Sign
<input type="checkbox"/> Yield Sign	<input type="checkbox"/> Yield Sign	<input type="checkbox"/> Yield Sign
<input type="checkbox"/> Speed Limit, ___ mph	<input type="checkbox"/> Speed Limit, ___ mph	<input type="checkbox"/> Speed Limit, ___ mph
<input checked="" type="checkbox"/> Other, List	<input type="checkbox"/> Other, List	<input type="checkbox"/> Other, List

Residential Handicapped
Parking


Location(s): 702 S. 33rd St

This has been submitted:

- In response to request by a citizen/ neighbor/ passerby: Ms. Carrie Miller
- In response to contracted reconstruction or improvements
- In response to developer-provided reconstruction or improvement
- In response to an internally-generated concern from

Remarks: Ms. Carrie Miller has met all the requirements

Submitted by:
(Field Checked 8/7/2024)



Scott Kreeger, PE
Senior Project Engineer

Recommend Approval/Denial:
Reviewed by:




Leslie Biek, PE
Assistant City Engineer

APPROVED DENIED

CITY OF SOUTH BEND, INDIANA
BOARD OF PUBLIC WORKS



Elizabeth A. Maradik, President



Joseph R. Molnar, Vice President



Gary A. Gilot, Member



Briana Micou, Member



Murray L. Miller, Member



Attest: Theresa M. Heffner, Clerk

Date: August 27, 2024

Distribution:
Bureau of Traffic and Lighting
Police Department Traffic Division

HANDICAPPED PARKING REQUEST

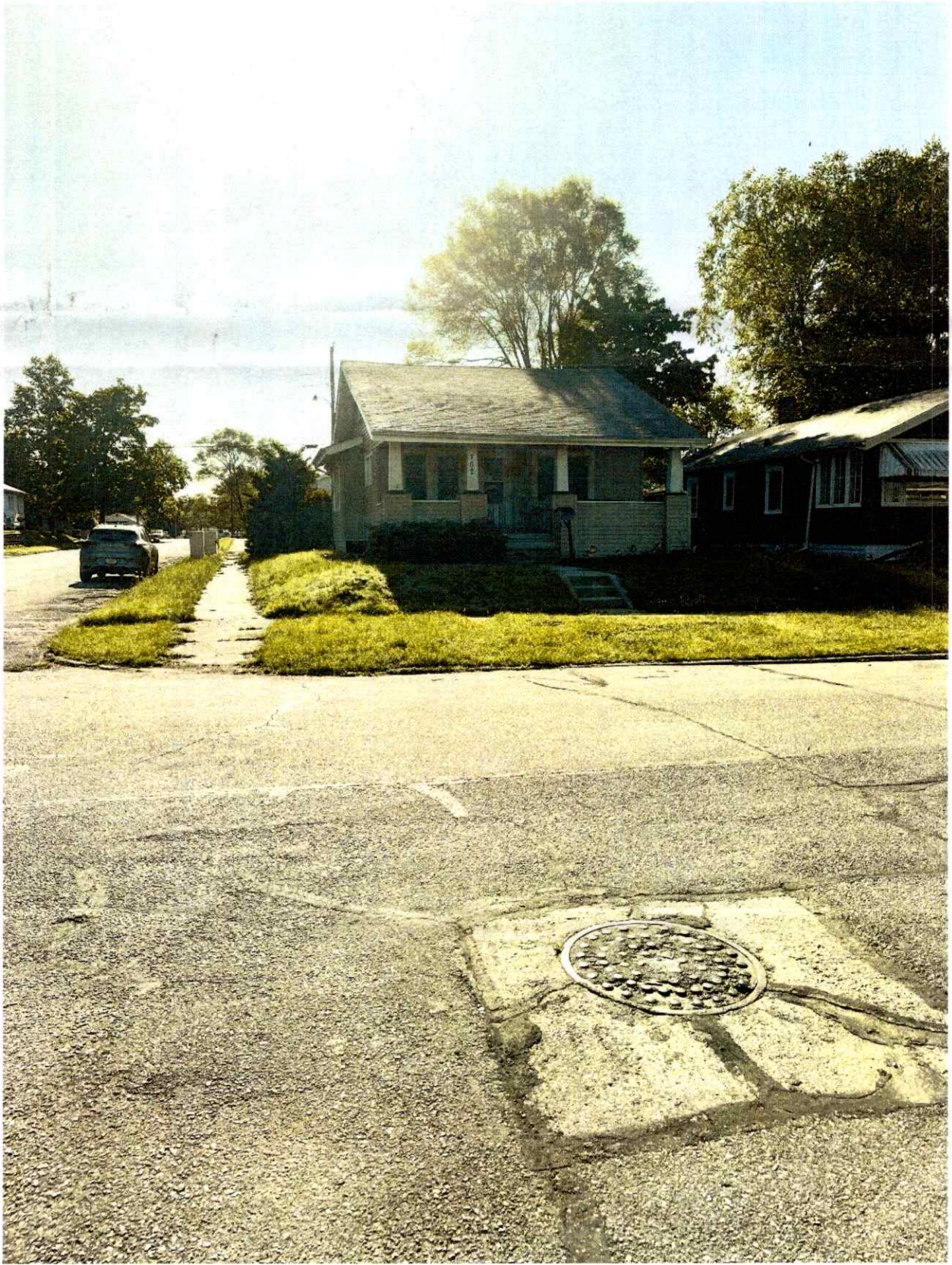
Ms. Carrie Miller
702 S. 33rd Street
Field Checked: 8/7/2024
Field Checked By: Scott Kreeger, P.E.



Notes:

- No driveway.
- Parking allowed on both sides of 33rd Street
- Access to front door involves steps.





**BOARD OF PUBLIC WORKS
AGENDA ITEM REVIEW REQUEST FORM**

Date	8/8/24	Department	Public Works
Name	Scott Kreeger, PE	Phone Extension	9245
BPW Date	8/27/24		

Required Prior to Submittal to Board

BPW Attorney	<input type="checkbox"/>	Attorney Name	_____
Dept. Attorney	<input type="checkbox"/>	Attorney Name	_____
Purchasing	<input type="checkbox"/>		_____

Check the Appropriate Item Type – Required for All Submissions

<input type="checkbox"/> Professional Services Agreement	<input type="checkbox"/> Contract	<input type="checkbox"/> Proposal	
<input type="checkbox"/> Open Market Contract	<input type="checkbox"/> Amendment/Addendum	<input type="checkbox"/> Special Purchase, QPA	
<input type="checkbox"/> Bid Opening	<input type="checkbox"/> Bid Award	<input type="checkbox"/> Req. to Advertise	<input type="checkbox"/> Title Sheet
<input type="checkbox"/> Quote Opening	<input type="checkbox"/> Quote Award	<input type="checkbox"/> Reject Bids/Quotes	
<input type="checkbox"/> Proposal Opening	<input type="checkbox"/> C/O & PCA No. _____	<input type="checkbox"/> PCA	
<input type="checkbox"/> Chg. Order, No. _____	<input checked="" type="checkbox"/> Traffic Control: _____	<input type="checkbox"/> Resolution	
	<u>Residential Handicap</u>		
	<u>Parking</u>		
<input type="checkbox"/> Other: _____		<input type="checkbox"/> Ease./Encroach	

Required Information

Company or Vendor Name	_____
New Vendor	<input type="checkbox"/> Yes <input type="checkbox"/> If Yes, Approved by Purchasing
	<input type="checkbox"/> No
MBE/WBE Contractor	<input type="checkbox"/> MBE <input type="checkbox"/> WBE Completed E-Verify Form Attached <input type="checkbox"/> Yes <input type="checkbox"/> No
Project Name	702 S 33 rd St Residential Handicap Parking
Project Number	_____
Funding Source	_____
Account No.	_____
Amount	_____
Terms of Contract	_____
Purpose/Description	<u>Recommend Approval</u>

For Change Orders Only

Amount of	<input type="checkbox"/> Increase	\$ _____
	<input type="checkbox"/> Decrease	(\$ _____)
Previous Amount		\$ _____
	Increase	_____ %
Current Percent of Change:	Decrease	(_____ %)
New Amount		\$ _____
	Increase	_____ %
Total Percent of Change:	Decrease	(_____ %)
Time Extension Amount:		_____
New Completion Date:		_____