

CITY HALL  
215 S. MARTIN LUTHER KING JR., BLVD.,  
SUITE 400  
SOUTH BEND, INDIANA 46601-1830



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

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

October 28, 2025

Ms. Lisa Rosansky  
730 S. 33<sup>rd</sup> St.  
South Bend, IN 46615

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

Dear Ms. Rosansky:

At its October 28, 2025 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 730 S. 33<sup>rd</sup> St.

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

Sincerely,

/s/ Hillary Horvath

Hillary Horvath, Clerk

Enclosures  
HH



**BOARD OF PUBLIC WORKS**  
**Request for Approval of**  
**Traffic Control Device(s)**

Date: October 28, 2025

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

<input checked="" type="checkbox"/> <b>New Installation</b>	<input type="checkbox"/> <b>Removal</b>	<input type="checkbox"/> <b>Revision</b>
<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): 730 S 33<sup>rd</sup> St

This has been submitted:

- ☒ In response to request by a citizen/ neighbor/ passerby: **Resident**  
☐ 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. Lisa Rosansky has met all the requirements

Submitted by:  
(Field Checked 10/15/2025)

Caitlin M Wyant  
Caitlin Wyant, EI  
Project Engineer

Recommend Approval/Denial:  
Reviewed by:

Leslie Biek  
Leslie Biek, PE  
Assistant City Engineer

☒ APPROVED      ☐ DENIED

CITY OF SOUTH BEND, INDIANA  
BOARD OF PUBLIC WORKS

Elizabeth A. Maradik, President

Gary A. Gilot  
Gary A. Gilot, Member

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Murray L. Miller, Member

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Joseph R. Molnar, Vice President

Breana Micou  
Breana Micou, Member

Hillary R. Horvath  
Attest: Hillary R. Horvath, Clerk

Date: October 28, 2025

Distribution:

Bureau of Traffic and Lighting  
Police Department Traffic Division

## HANDICAPPED PARKING REQUEST

Ms. Lisa Rosansky  
730 S 33<sup>rd</sup> St  
Field Checked: 10/15/2025  
Field Checked By: Caitlin Wyant, EI



### Notes:

- Garage off alley, but driveway is not paved.
- Walkway from garage is in poor condition.
- Parking allowed on both sides of 33<sup>rd</sup> St
- Access to front door involves 2 sets of steps.

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

Date	10/17/2025		
Name	Caitlin Wyant, EI	Department	Public Works
BPW Date	10/28/2025	Phone Extension	7483

**Required Prior to Submittal to Board**

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

**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. <u>      </u>	<input type="checkbox"/> PCA	
<input type="checkbox"/> Chg. Order, No. <u>      </u>	<input checked="" type="checkbox"/> Traffic Control: <u>Residential Handicap</u> <u>Parking</u>	<input type="checkbox"/> Resolution	
<input type="checkbox"/> Other: <u>                    </u>		<input type="checkbox"/> Ease./Encroach	

**Required Information**

Company or Vendor Name

New Vendor

☐ Yes ☐ If Yes, Approved by Purchasing

☐ No

MBE/WBE Contractor

☐ MBE

☐ WBE

Completed E-Verify Form Attached

☐ Yes

☐ No

Project Name

730 S 33<sup>rd</sup> St Residential Handicap Parking

Project Number

Funding Source

Account No.

Amount

Terms of Contract

Purpose/Description

Recommend Approval

**For Change Orders Only**

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