



CITY OF SOUTH BEND

BOARD OF PUBLIC WORKS

January 13, 2026

Ms. Charm Malone
507 Rush St.
South Bend, IN 46601

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

Dear Ms. Malone:

At its January 13, 2026 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 507 Rush St.

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

Sincerely,

/s/ Hillary Horvath

Hillary Horvath, Clerk



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

Date: January 13, 2026

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): 507 Rush 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. Charm Malone has met all the requirements

Submitted by:
(Field Checked 12/15/2025)

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

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Elizabeth A. Maradik, President

Murray L. Miller
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Hillary R. Horvath
Attest: Hillary R. Horvath, Clerk

Distribution:
Bureau of Traffic and Lighting
Police Department Traffic Division

Date: January 13, 2026

HANDICAPPED PARKING REQUEST

Ms. Charm Malone
507 Rush St, 46601
Field Checked: 12/15/2025
Field Checked By: Caitlin Wyant, EI



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

| | | | |
|----------|-------------------|-----------------|--------------|
| Date | 12/15/2025 | | |
| Name | Caitlin Wyant, EI | Department | Public Works |
| BPW Date | 01/13/2026 | Phone Extension | 7483 |

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: <u>Residential Handicap</u> <u>Parking</u> | <input type="checkbox"/> Resolution | |
| <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 | 507 Rush 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: | | | | |