REQUEST FOR TRAFFIC

MANAGEMENT MEASURES

**Please** [**read our road safety information**](http://www.newport.gov.uk/en/Transport-Streets/Road-safety/Road-safety.aspx) **before completing this form**

1. **Your details**

Name: ………………………………………………………………………………

Address: ……………………………………………………………………………

Email: ……………………………………………………………………………….

Telephone number: ………………………………………………………..

1. **Location**

Street: ………………………………………………………………………………

Additional location details: ………………………………………………………….

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1. **What type of measure are you requesting? :**

Traffic calming (speed cushions)\* 20mph speed limit zone with traffic calming\*

Pedestrian crossing Access protection marking

Traffic signs or road markings School crossing patrol

Traffic regulation order Resident parking scheme

\*Traffic calming can only be considered where it will improve safety in areas where people are being injured in collisions with speeding traffic

1. **Additional information**

Are there measures already in place? **Y / N** Is the street close to a school or on a route used by pupils? **Y / N**

Is the street on a bus route? **Y / N** Is the road adopted? **Y / N**

Are you aware of collisions where people have been injured? **Y / N**

1. **Please tell us why you feel these measures are needed:**

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Return by email to streetscene@newport.gov.uk or post to Streetscene, Newport City Council, Civic Centre, Newport NP20 4UR