

POLICE DEPARTMENT

200 South Lincolnway North Aurora, Illinois 60542 Phone: (630) 897-8705 Fax: (630) 897-8700 www.northaurora.org

> Joseph DeLeo CHIEF OF POLICE

> > ſ

TRAFFIC ENFORCEMENT REQUEST

				Date of Request		
Individual Making Enforcement Request						
Name			Phone Number			
] [
Address			E-Mail			
How should we contact you?						
Postal Mail E-mail Telephone Pleas					not contact me	
Тур	e of Complaint(s)	Day(s) of Occurence		Time of Occur	rence	
Spee	eding Vehicles	Sunday	Morning	S	pecific Time Frame	
Stop	o Sign Violators	Monday	Afternoon	From	□ A.M. □ P.M.	
Park	king Violators	Tuesday	Evening			
Lou	d Vehicles	Wednesday	Varies	То	A.M P.M.	
Abandoned Vehicles		Thursday				
Roadway Obstructions		Friday				
Traffic Sign Obstructions		Saturday	Action Requested			
Ped	estrian Actions	Entire Week	The S.M.A.R.	T. in my area (please	list the location in comments)	
Oth	er		More police	presence.	Traffic Enforcement	
			I just want the police to be aware of the problem.			
Location of the Problem						
(Please be specific)						
Comments (List specific Vehicle, Persons and/or Address Involved)						
This enforcement request will be reviewed by the department Traffic Officer.						
All requests will be prioritized based upon availability of resources.						
Reviewed by:						