

# Formal Request for Local Traffic Signal Adjustment

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Traffic Department / Relevant Authority Name]

[Department Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to formally request an assessment of the traffic signal at the intersection of [specific intersection or street name], due to [briefly explain the reason, e.g., safety concerns, increased traffic volume, etc.].

In recent months, I have observed [describe specific issues, e.g., long wait times, near misses, etc.]. These conditions pose a potential risk to both pedestrians and motorists in our community.

Therefore, I kindly ask that your department consider a review of the current signal timing and functionality, and explore potential adjustments that could enhance safety and efficiency in this area.

Thank you for your attention to this important matter. I look forward to your prompt response.

Sincerely,

[Your Name]