CITIZEN ROAD IMPROVEMENT REQUEST
CITY OF EL CERRITO

Please identify problems to be corrected by maintenance work, signs and striping and/or construction projects.

Location: Roadway name ________________________________

Landmarks: (cross street, address, etc.) Be specific! ________________________________

Description of Problem: (What is it and why is it a problem?) ________________________________

Name ________________________________ Day phone ________________________________

Address ________________________________ Zip ________________________________ Date ________________________________

Please contact: City of El Cerrito, Public Works Department
10890 San Pablo Avenue; El Cerrito, CA 94530; Attn: Engineering Manager
vortiz@ci.el-cerrito.ca.us
Phone: (510) 215-4382 FAX: (510) 233-5401

Visit us at www.el-cerrito.org