## **Attachment B**

## **Trousdale Estates Construction Traffic Management Plan**

Ser	nd completed form to: <u>t</u>	rousdale@beverlyhills.or	rg			
Job	Site Address:					
Pro	ject Description:					
Coi	ntact Name:					
	Phone: ——					
	Email:					
Job	Start and End Dates:					
Bui	lding Permit Number:					
Rig	ht of Way Use Permit Nu	umber*:				
	Type of Activity	Vehicle Type	Daily # of Vehicles	Start Date	End Date	_
						_
	-		g delivery/hauling. A Right requiring on street parking.	•	must be obtaine	ed .
	f-Site Parking Provisior	ns				
Loc						
LOC	cation of off-site parking	secured by contractor:				