

DEPUTATION / REQUEST FOR INFORMATION FORM

Please complete all applicable sections in full.

COMMITTEE: Committee of the Whole Transportation **DATE:** Thursday,
October 05, 2017 **AGENDA ITEM NO.:** N/A **TITLE:** N/A

1. INDIVIDUAL MAKING THE DEPUTATION

Name: Khalid Rasool
Address: 10610 Jane Street
Street Address
Maple, ON L6A 3A2
Town **Postal Code**

Home Telephone: **Business:** 905-303-4000 ext: 2291

E-Mail Address: Properties@Ahmadiyya.ca

I prefer to be contacted by: **E-Mail:** Yes

2. NAME OF GROUP OR PERSON(S) BEING REPRESENTED (if applicable)

Ahmadiyya Muslim Jama'at Canada

3. BRIEF STATEMENT OF ISSUE OR PURPOSE OF DEPUTATION:

Need for traffic signals at Mosque Gate and Teston Road with justifications

I do not wish to make a Deputation, however, I would like to be informed of Council's decision and receive any further information.

Personal Information on this form is collected under the legal authority of the Municipal Act, as amended and the *Planning Act*, as amended. The Deputant's information is collected and maintained for the purpose of creating a record that is available to the general public, pursuant to Section 27 of the *Municipal Freedom of Information and Protection of Privacy Act*. As such, information collected here may form part of the public record. Questions about this collection should be directed to the Regional Clerk, York Region, 17250 Yonge Street, Newmarket, Ontario, L3Y 6Z1, telephone (905) 830-4444 ext. 7130.