

# Brampton School Traffic Safety Council

## Site Inspection Request



**Brampton School Traffic Safety Council**  
BRAMPTON  
Flower City

Request for site inspection by:

Resident  School Administrator  Other (please specify) \_\_\_\_\_

Name:  Skirten for JENN SCHNIER \_\_\_\_\_ Date of request:  Feb. 23/24 \_\_\_\_\_

Address:  100 Commuter \_\_\_\_\_

Email:  \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Name of school/intersection  Mount Pleasant Village P.S- Intersection of Commuter & Ganton Heights \_\_\_\_\_

Reason(s) for request – check all that apply:

Park and Ride  Traffic congestion on school property  Traffic congestion on school street  
 Parking issues  Crossing guard inquiry  Other (please specify) \_\_\_\_\_

Observations:

*Note: be specific – include date, time, location, etc. If you need more space, or would like to include photos, drawings, diagrams, etc., please attach another sheet.*

Resident would like a crossing guard at the intersection of Commuter and Ganton Heights. Indicated that drivers do not stop for pedestrians. \_\_\_\_\_

Have you told anyone at the school about of this issue?  Yes  No

Who did you tell?  Principle \_\_\_\_\_ When? \_\_\_\_\_

Verbally or in writing?  Verbally  In writing

What was the response?

Requests have been made a few times since school has opened. \_\_\_\_\_

Send completed form to:

City Clerk's Office, City of Brampton.  
2 Wellington Street West, Brampton, ON L6Y 4R2  
Fax: 905.874-2119 Email: cityclerksoffice@brampton.ca

Privacy Statement

*Personal information is being collected under the authority of the Municipal Act. The information will only be used to communicate with you regarding your inquiry. Questions about this collection may be directed to our Call Centre by calling 311 (within Brampton city limits) or 905.874.2000 (outside city limits). Please review the City's Privacy statement for more information.*

### For Official Use Only

Date of last site inspection:  \_\_\_\_\_ \*\*if less than two years ago, attach copy of site visit report

Was this issue addressed in that visit? Yes  No

Have the recommendations from the site visit been addressed? Yes  No

Date of committee meeting where this information will be presented:

Response to Inquiry: Date:  \_\_\_\_\_ By (name):  \_\_\_\_\_