

Brampton School Traffic Safety Council

Site Inspection Request



Brampton BRAMPTON
Flower City
School Traffic
Safety
Council

Request for site inspection by:

☒ Resident ☐ School Administrator ☐ Other (please specify) _____

Name: Marissa Martindale Date of request: Sept. 15, 2020

Address: _____

Email: _____ Phone: _____ Fax: _____

Name of school/intersection Williams PKWY and Valleyway Dr.

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.

St. Jean-Marie Vianney starts at 9:00am and ends at 3:30pm. Some children linger at the nearby park after school before walking home, so please ensure inspection is long enough to quantify these groups.

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

Who did you tell? School principal When? 2018

Verbally or in writing? ☒ Verbally ☐ In writing

What was the response?

To contact our City Counsellor. I have not contacted the counsellor; we were granted a courtesy bus seat for that year. I now have 2 kids attending SJMV; grade 7 and JK. We would like them to walk to school

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.

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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):