Brampton School Traffic Safety Council





Request for site inspection		
Resident School Administrator Other (please specify)		
Name: Date of request:		
Address:		
Email:	Phone:	Fax:
Name of school/intersection	۱	
	ffic congestion on school pro	perty 🔲 Traffic congestion on school street ner (please specify)
drawings, diagrams, etc., plea	se attach another sheet.	ed more space, or would like to include photos,
Who did you tell? Verbally or in writing? What was the response?	Verbally 🖵 In writing	Yes No When?
to communicate with you rega	collected under the authority of arding your inquiry. Questions an on city limits) or 905.874.2000 (the Municipal Act. The information will only be used bout this collection may be directed to our Call Centre outside city limits). Please review the City's Privacy
For Official Use Only		
Date of last site inspection: Was this issue addressed in tha Have the recommendations fro	nt visit? Yes No	