PETITION

(Please identify the petitioners in general terms. For example, residents of subdivision name, residents of community name, residents of the Town of Penetanguishene etc.)

(Briefly state the matter or argument in support of your petition.) This statement <u>MUST</u> appear at the top of each page on which you collect signatures.

(State the specific request for action you wish for Council to undertake.)

Name and contact information of the petition spokesperson or principal petitioner:

Name	Telephone number	
	·	
Mailing Address (if different than above)	Email	
č		
Petition Name (box 1 above)		

Name of the petition spokesperson or principal petitioner

(Briefly state the matter or argument in support of your petition.) HERE FOLLOWS THE SIGNATURES

NAME	ADDRESS	SIGNATURE
Please print first and last name	Your residential address in the Town of	Only original signatures are permitted. If signing on behalf of a business, indicate if you're the owner, president
	Penetanguishene	If signing on behalf of a business,
		indicate it you're the owner, president
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NOTICE OF COLLECTION AND CONSENT

Personal information on this form is collected under the authority of section 28(2) of the Municipal Freedom of Information and Protection of Privacy Act for the purpose of informing Council as to your views of a matter over which Council has the power to act. This information will not be used by the Town for any purpose other than o ensure it meets Council's requirements for a valid petition and to ensure contact with the spokesperson or principal petitioner. Once submitted to Council, this petition becomes a public document and is available for viewing. Questions relating to the collection and use of this information may be directed to the Clerk at scooper@penetanguishene.ca