

100 John West Way Aurora, Ontario L4G 6J1 (905) 727-3123 aurora.ca

Delegation Request

This request and any written submissions or background information for consideration by either Council or Committees of Council is being submitted to Legislative Services.

Council or Committee (Choose One) *	Council or Committee Meeting Date * ?
Council	2024-7-9
Subject *	
Presentation: Turn Prohibitions at St. John's Sidero	ad and Old Yonge Street
Full Name of Spokesperson and Name of Group or F	Person(s) being Represented (if applicable) *
Joseph Petrungaro and Nelson Costa	
Brief Summary of Issue or Purpose of Delegation *	
To present the proposed turn prohibitions at St. Joh	n's Sideroad and Old Yonge Street
Have you been in contact with a Town staff or Counc	cil member regarding your matter of interest? *
∇ Yes	♠ No
I acknowledge that the Procedure By-law permits five	ve (5) minutes for Delegations. *
✓ Agree	