

✓ Agree

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	2024-10-22	
Subject *		
2025 York Region Transit Annual Plan		
Full Name of Spokesperson and Name of Group or Pe	rson(s) being Represented (if applicable) *	
Tamas Hertel, Service Planning Manager, York Regio	n Transit	
Brief Summary of Issue or Purpose of Delegation * To present the 2025 YRT Annual Plan including the 2 feedback recieved, 2025 annual plan and 2025 progressions.		ess, public
	member regarding your matter of interest? ¹ ○ No	*
Have you been in contact with a Town staff or Council Pes Full name of the Town staff or Council member with whom you spoke		

I acknowledge that the Procedure By-law permits five (5) minutes for Delegations. *