

DEPUTATION / REQUEST FOR INFORMATION FORM

Please complete all applicable sections in full.

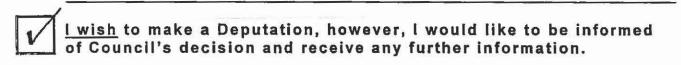
COMMITTEE					DATE	
AGE	NDA ITEN	NO	_TITLE		a	
1.	INDIVIDUAL MAKING THE DEPUTATION					
	Name:	Khalid Usman				
	Address:	Street Address				
		Markham Town	_			ostal Code
	Home Telephone: E-Mail Address:			Business:		
	l prefer to	be contacted by:	Mail	E-Mail X		

2. NAME OF GROUP OR PERSON(S) BEING REPRESENTED (if applicable)

3. BRIEF STATEMENT OF ISSUE OR PURPOSE OF DEPUTATION

Recently the Region passed holiday shopping bylaw that allows retail businesses to open on all days of the year except Christmas Day which was done without consultation with public and groups that are directly affected by this Bylaw

"Please Give everyone in York Region the holidays they deserve. Don't mix business with quality of life".



Personal Information on this form is collected under the legal authority of the Municipal Act, as amended and the Planning Act, as amended. The Deputant's information is collected and maintained for the purpose of creating a record that is available to the general public, pursuant to Section 27 of the Municipal Freedom of Information and Protection of Privacy Act. As such, information collected here may form part of the public record. Questions about this collection should be directed to the Regional Clerk, York Region, 17250 Yonge Street, Newmarket, Ontario, L3Y 6Z1, telephone (905) 830-4444 ext. 7130.

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