ATTACHMENT 1

Dog Off-Leash Petition

Location of proposed Dog Off-Leash Area:

A local volunteer group is seeking the Town of Markham's approval to install a dog off-leash area at the above location. Each dog off-leash area approved will be operated and maintained by the volunteer group on behalf of the Town. One of the requirements of the Town of Markham is that a minimum of 70% of residents that live within 120 meters (400 feet) of the proposed area must consent to the installation of the leash free area. Please indicate whether or not you support this proposal.

| Date | Name | Address | Phone No. | For | Against |
|------|------|---------|-----------|-----|---------|
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Appendix 'B' VOLUNTEER DOG-OFF LEASH PROGRAM

APPLICATION FORM

PLEASE READ CAREFULLY

| Date: | | Group Name: | | |
|---|-----------------------------------|--|--|--|
| Location: | | Size: Tel. No.: | | |
| Name of Repres | entative: | | | |
| Parking Availab ☐ yes | | If "NO", please indicate cost to build | | |
| | | | | |
| Is fencing available on site? □ yes □ no | | If "NO", please indicate cost to build | | |
| • | | | | |
| | | | | |
| Accessibility for ges | regular maintenance ☐ no | | | |
| Playgrounds/Spo □ yes | rts fields/facilities at location | | | |
| Please attach a do and the amenitie shall also be attac | s proposed. A copy of the grou | etch outlining the location of the proposed area, up's constitution, by-laws and membership list | | |
| Group Co-ordina | tor | Date | | |
| Umbrella Commi | ttee: 🗆 | Date: | | |
| Town Staff: 🗆 | | Date: | | |