ATTACHMENT 1



FLAG RAISING & PROCLAMATION REQUEST FORM

I am requesting the following (please select all that apply):		
Flag Raising (Complete Parts 1-3, Parts 5 & 6, Annex A, Annex B)		
Proclamation (Complete Parts 1-4)		
PART 1: ORGANIZATION DETAILS		
ORGANIZATION NAME		
Ontario Building Officials Association (OBOA)		
ORGANIZATION TYPE		
Public Institution		•
PART 2: REQUESTER DETAILS		
LAST NAME OR SINGLE NAME	FIRST NAME	
Lawrence	Wagner	
POSITION		
CEO		
STREET ADDRESS		APT/UNIT NUMBER
200 Marycroft Avenue		Unit 8
CITY/TOWN	PROVINCE	POSTAL CODE
Vaughan	ON	L4L5X4
EMAIL ADDRESS	TELEPHONE NUMBER	
	(905) 264-1662	
PART 3: ALTERNATE CONTACT DETAILS		
LAST NAME OR SINGLE NAME	FIRST NAME	
Pucci	Ben	
POSITION		
Director of Building Standards		
STREET ADDRESS		APT/UNIT NUMBER
2141 Major Mackenzie Drive		
CITY/TOWN	PROVINCE	POSTAL CODE
Vaughan	ON	L6A1T1
EMAIL ADDRESS	TELEPHONE NUMBER	
ben.pucci@vaughan.ca	(905) 832-8585	

PART 4: PROCLAMATION REQUEST DETAILS		
CAUSE/EVENT/COMMEMORATION TO BE PROCLAIM May is Building Safety Month	ED (Written as you want it to be Declared by Council)	
O DAY	VEEK	
PART 5: FLAG RAISING DETAILS		
CAUSE/EVENT/COMMEMORATION TO BE RECOGNIZE	∃D	
FLAG TO BE RAISED (Please attach an image of the flag to this form)		
ANTHEM OR MUSIC TO BE PLAYED (If required)		
WILL THERE BE A PUBLIC EVENT AT CITY HALL FOLLOWING THE FLAG RAISING CEREMONY?		
YES - Please note additional permits, fees and charges may apply for extended use of the space and other resources.		
NO		
PART 6: PUBLIC CEREMONY DETAILS		
The City of Vaughan endeavors to accommodate the requestor's preferred date, however it is NOT GUARANTEED . To assist in scheduling your public ceremony, we ask you to designate up to 3 alternate dates for booking.		
PREFERRED CEREMONY DATE	ALTERNATE CEREMONY DATE	
TIME OF DAY PREFERENCE		
AM (09:00 a.m. – 12:00 p.m.)	PM (12:00 p.m. – 4:00 p.m.)	
ESTIMATED NUMBER OF ATTENDEES		