

Statement of Representative of Petitioners

(pursuant to the *Municipal Government Act* and amendments thereto)

I, _____ of _____
(Full Name) (Complete Address)
in the Municipal District of Greenview No. 16, in the Province of Alberta, state that I represent the petitioners and
am the person to whom the Chief Administrative Officer, or designate, may direct any inquiries with regard to the
petition. I may be contacted by phone at _____ or by email at _____.

DATED at the _____ of _____, in the
(Complete Address) (Hamlet or region)
Province of Alberta, this _____ day of _____, 20_____.

Witness

Signature of Representative

(Printed Name)

The personal information contained in this petition will not be disclosed to anyone except the chief administrative officer and the chief administrative officer's delegates, and will not be used for any purpose other than validating the petition.

The personal information on this form is collected under the authority of s33(c) and s39(1)(a)(b)(c) of the Freedom of Information and Protection of Privacy (FOIP) Act. The information is required for the purpose of carrying out Greenview's petitions obligations pursuant to the *Municipal Government Act*. If you have any questions about the collection, use or disclosure of your personal information, please contact Greenview's FOIP Coordinator at 780-524-7600 or foip@mdgreenview.ab.ca.
