

# Site Inspection Report

Site						
School #1		Address			School Times _____ AM _____ PM Walk to School <input type="checkbox"/> Yes <input type="checkbox"/> No	
Student Population	French Immersion Population	No. of Large Buses _____ No. of Students on the Bus _____		No. of Small Buses _____ No. of Students on the Bus _____		
School #2		Address			School Times _____ AM _____ PM Walk to School <input type="checkbox"/> Yes <input type="checkbox"/> No	
Student Population	French Immersion Population	No. of Large Buses _____ No. of Students on the Bus _____		No. of Small Buses _____ No. of Students on the Bus _____		
Location:						
Proximity to School	Name of School #1 _____ in front of		within _____ <input type="checkbox"/> feet <input type="checkbox"/> metres			
	Name of School #2 _____ in front of		within _____ <input type="checkbox"/> feet <input type="checkbox"/> metres			
Accident History (during school times) Yes <input type="checkbox"/> No <input type="checkbox"/>		Comments:				
Date of Inspection		Inspection Time AM _____ to _____ PM _____ to _____		Requested By		
Prepared By		Request For				

Observers					
File Number <b>RT.10</b>		File Number <b>RT.10</b>		Ward	
Observed By		AM	PM	Observed By	

Site Conditions					
School Signs:	<input type="checkbox"/> School Area Signs	<input type="checkbox"/> School Crossing Signs	<input type="checkbox"/> Parking/Stopping Prohibition	<input type="checkbox"/> No U-turn Sign	
Posted Speed Limit:	<input type="checkbox"/> 30 km/hr	<input type="checkbox"/> 40 km/hr	<input type="checkbox"/> 50 km/hr	<input type="checkbox"/> 60 km/hr	<input type="checkbox"/> Other: _____
Visibility of Crossing Pedestrians:	<input type="checkbox"/> Poor	<input type="checkbox"/> Fair	<input type="checkbox"/> Good	Comments _____	
Sight Obstructions:	<input type="checkbox"/> Hedges	<input type="checkbox"/> Trees	<input type="checkbox"/> Fences	<input type="checkbox"/> Bus Shelter	
	<input type="checkbox"/> Newspaper Boxes	<input type="checkbox"/> Other (Specify) _____			
Road Grade:	<input type="checkbox"/> Flat	<input type="checkbox"/> Incline	<input type="checkbox"/> Decline		
Road Geometrics:	<input type="checkbox"/> Straight	<input type="checkbox"/> Curved	Comments _____		
Road Width/Street Name _____	Curb to Curb _____		No. of _____	No. of _____	No. of _____
Leg: <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W	<input type="checkbox"/> Feet <input type="checkbox"/> Metres		Bike Lanes	Through Lanes	Turning Lanes
Road Width/Street Name _____	Curb to Curb: _____		No. of _____	No. of _____	No. of _____
Leg: <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W	<input type="checkbox"/> Feet <input type="checkbox"/> Metres		Bike Lanes	Through Lanes	Turning Lanes
Road Conditions:	AM: <input type="checkbox"/> Dry	<input type="checkbox"/> Wet	<input type="checkbox"/> Snow Covered	<input type="checkbox"/> Ice	
	PM: <input type="checkbox"/> Dry	<input type="checkbox"/> Wet	<input type="checkbox"/> Snow Covered	<input type="checkbox"/> Ice	
Sidewalks:	<input type="checkbox"/> Not Present	<input type="checkbox"/> North	<input type="checkbox"/> South	<input type="checkbox"/> East	<input type="checkbox"/> West
Route Survey:	<input type="checkbox"/> Shopping Area	<input type="checkbox"/> Construction	<input type="checkbox"/> Driveway	<input type="checkbox"/> Parked Vehicle(s)	
Within <input type="checkbox"/> Feet <input type="checkbox"/> Metres:	<input type="checkbox"/> Transit Bus Stop	<input type="checkbox"/> Underpass	<input type="checkbox"/> Other (specify) _____		
Traffic Calming:	<input type="checkbox"/> Speed Bumps	<input type="checkbox"/> Speed Cameras	<input type="checkbox"/> Crossover	<input type="checkbox"/> Other _____	



**Observations**

Volume of Traffic:	<b>AM:</b> <input type="checkbox"/> Heavy <input type="checkbox"/> Intermittent <input type="checkbox"/> Light	<b>PM:</b> <input type="checkbox"/> Heavy <input type="checkbox"/> Intermittent <input type="checkbox"/> Light
Number of Crossing Pedestrians:	<b>AM:</b> Midblock _____ North East South West	<b>PM:</b> Midblock North East South West
Turning Traffic:	<b>AM:</b> <input type="checkbox"/> Heavy <input type="checkbox"/> Intermittent <input type="checkbox"/> Light	<b>PM:</b> <input type="checkbox"/> Heavy <input type="checkbox"/> Intermittent <input type="checkbox"/> Light

**Traffic Behaviour** (Comment or Recommendation Required)

<b>AM:</b> <input type="checkbox"/> Illegal U-turn <input type="checkbox"/> Running Red Light <input type="checkbox"/> Speeding <input type="checkbox"/> Stopping Non-Compliance <input type="checkbox"/> Illegal Stopping <input type="checkbox"/> Illegal Parking <input type="checkbox"/> Other _____
<b>PM:</b> <input type="checkbox"/> Illegal U-turn <input type="checkbox"/> Running Red Light <input type="checkbox"/> Speeding <input type="checkbox"/> Stopping Non-Compliance <input type="checkbox"/> Illegal Stopping <input type="checkbox"/> Illegal Parking <input type="checkbox"/> Other _____

**Comments/Conflicts** Indicate the corresponding number(s) as well as additional comment(s)

**Recommendations** Indicate the corresponding number(s) as well as location and/or school.

# Site Inspection Report

## Site

School #1	Churchill Meadows Public School	Address	3310 McDowell Dr. Mississauga, ON L5M 6S1	School Times	8:30 AM 2:50 PM
				Walk to School <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Student Population	543	French Immersion Population	-	No. of Large Buses	1
				No. of Small Buses	4
				No. of Students on the Bus	42
				No. of Students on the Bus	21
School #2	St. Faustina Catholic Elementary School	Address	3420 McDowell Dr. Mississauga, ON L5M 6R7	School Times	9:00 AM 3:30 PM
				Walk to School <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Student Population	228	French Immersion Population	-	No. of Large Buses	-
				No. of Small Buses	3
				No. of Students on the Bus	-
				No. of Students on the Bus	24
Location:	McDowell Drive and Tenth Line West				
Proximity to School	Name of School #1	Churchill Meadows Public School	in front of <input type="checkbox"/>	within	300 <input type="checkbox"/> feet <input checked="" type="checkbox"/> metres
	Name of School #2	St. Faustina Catholic Elementary School	in front of <input type="checkbox"/>	within	700 <input type="checkbox"/> feet <input checked="" type="checkbox"/> metres
Accident History (during school times)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Comments:		
Date of Inspection	2025	10	07	Inspection Time AM	8:00 to 8:55
				PM	2:50 to 3:55
				Requested By	Supervisor, Crossing Guards
Prepared By	M. MATTEAZZI		Request For	Removal of 2nd School Crossing Guard - 1st Site Inspection	

## Observers

File Number	RT.10	File Number	RT.10	Ward	10
Observed By	AM	PM	Observed By	AM	PM
M. MATTEAZZI	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
S. DUFFIN	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
W. YONAN	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

## Site Conditions

School Signs:	<input type="checkbox"/> School Area Signs	<input type="checkbox"/> School Crossing Signs	<input checked="" type="checkbox"/> Parking/Stopping Prohibition	<input type="checkbox"/> No U-turn Sign
Posted Speed Limit:	<input type="checkbox"/> 30 km/hr	<input checked="" type="checkbox"/> 40 km/hr	<input type="checkbox"/> 50 km/hr	<input type="checkbox"/> 60 km/hr <input type="checkbox"/> Other: _____
Visibility of Crossing Pedestrians:	<input type="checkbox"/> Poor	<input type="checkbox"/> Fair	<input checked="" type="checkbox"/> Good	Comments: _____
Sight Obstructions:	<input type="checkbox"/> Hedges	<input type="checkbox"/> Trees	<input type="checkbox"/> Fences	<input type="checkbox"/> Bus Shelter
	<input type="checkbox"/> Newspaper Boxes	<input type="checkbox"/> Other (Specify) _____		
Road Grade:	<input checked="" type="checkbox"/> Flat	<input type="checkbox"/> Incline	<input type="checkbox"/> Decline	
Road Geometrics:	<input checked="" type="checkbox"/> Straight	<input type="checkbox"/> Curved	Comments: _____	
Road Width/Street Name	McDowell Drive	Curb to Curb	<input checked="" type="checkbox"/> Feet <input type="checkbox"/> Metres	34
Leg:	<input type="checkbox"/> N <input type="checkbox"/> S <input checked="" type="checkbox"/> E <input type="checkbox"/> W	No. of Bike Lanes	<input type="checkbox"/> Through Lanes	2
		No. of Turning Lanes	<input type="checkbox"/>	
Road Width/Street Name		Curb to Curb:	<input type="checkbox"/> Feet <input type="checkbox"/> Metres	
Leg:	<input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W	No. of Bike Lanes	<input type="checkbox"/> Through Lanes	
		No. of Turning Lanes	<input type="checkbox"/>	
Road Conditions:	AM: <input type="checkbox"/> Dry	<input checked="" type="checkbox"/> Wet	<input type="checkbox"/> Snow Covered	<input type="checkbox"/> Ice
	PM: <input checked="" type="checkbox"/> Dry	<input type="checkbox"/> Wet	<input type="checkbox"/> Snow Covered	<input type="checkbox"/> Ice
Sidewalks:	<input type="checkbox"/> Not Present	<input checked="" type="checkbox"/> North	<input checked="" type="checkbox"/> South	<input checked="" type="checkbox"/> East <input checked="" type="checkbox"/> West
Route Survey:	<input type="checkbox"/> Shopping Area	<input type="checkbox"/> Construction	<input type="checkbox"/> Driveway	<input type="checkbox"/> Parked Vehicle(s)
Within <input checked="" type="checkbox"/> Feet <input type="checkbox"/> Metres	10	<input checked="" type="checkbox"/> Transit Bus Stop	<input type="checkbox"/> Underpass	<input type="checkbox"/> Other (specify) _____
Traffic Calming:	<input type="checkbox"/> Speed Bumps	<input type="checkbox"/> Speed Cameras	<input type="checkbox"/> Crossover	<input type="checkbox"/> Other: _____

**Details**

Weather Conditions: AM:  Dry  Sunny  Rain  Snow Temperature  Other   
 PM:  Dry  Sunny  Rain  Snow Temperature  Other   
 Type of Crossing:  4 Way Intersection  3 Way Intersection  Midblock (i.e., not an intersection)  
 Type of Control:  Traffic Lights  Yield Signs  Pedestrian Crossover  No Control  
 Stop Signs (Traffic is stopped on one street only)  All Way Stop (Traffic is stopped in all directions)

**Crossing Guard Warrant Survey**

Location:   
 Safe Gap Time Safe Gap Time Calculation (if applicable):  $\left( \frac{W}{3.5} + 4 \right) =$   seconds  
 Signalized Intersection Turning Traffic Count

**Morning Intervals**

# of Peds	Time (AM)	Gaps Leg: <input type="checkbox"/> N <input type="checkbox"/> S <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> Midblock	# of Gaps
0,0	8:00 - 8:05	0,0	
0,0,0	8:05 - 8:10	0,0,0	
0,0,0,0	8:10 - 8:15	/,0,0,/	
0,0,0	8:15 - 8:20	0,/,0	
0,///P,/P,0	8:20 - 8:25	//,/,0	
0,0,///P,0,0	8:25 - 8:30	0,0,0,0	
0,0,0	8:30 - 8:35	/,0,0	
0,0,0,0	8:35 - 8:40	0,0,0,0	
//,0	8:40 - 8:45	0,0	
0,0,0	8:45 - 8:50	/,0,0	
//,0,0	8:50 - 8:55	0,0,//	

**Afternoon Intervals**

# of Peds	Time (PM)	Gaps Leg: <input type="checkbox"/> N <input type="checkbox"/> S <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> Midblock	# of Gaps
0,0	2:50 - 2:55	0,0,//	
0,0,0	2:55 - 3:00	0,/,0	
/,0,0,0,///P	3:00 - 3:05	0,/,/,/,//	
0,0,0	3:05 - 3:10	///,/,0	
0,0,0	3:10 - 3:15	0,0,0	
0,/P,0,0,0	3:15 - 3:20	/,/,0,0,0	
0,0,0	3:20 - 3:25	//,0,/	
0,0,0	3:25 - 3:30	0,0,0	
0,0,0,0	3:30 - 3:35	0,/,/,0	
0,0,0	3:35 - 3:40	/,0,0	
0,0,0	3:40 - 3:45	0,//,0	
0,0,0	3:45 - 3:50	0,0,0	
0,0	3:50 - 3:55	/,0	

**Observations**

Volume of Traffic:	AM: <input type="checkbox"/> Heavy <input type="checkbox"/> Intermittent <input type="checkbox"/> Light	PM: <input type="checkbox"/> Heavy <input type="checkbox"/> Intermittent <input type="checkbox"/> Light
Number of Crossing Pedestrians:	AM: Midblock <input type="checkbox"/> North <input type="checkbox"/> East <input type="text" value="6"/> South <input type="checkbox"/> West <input type="checkbox"/>	PM: Midblock <input type="checkbox"/> North <input type="checkbox"/> East <input type="text" value="5"/> South <input type="checkbox"/> West <input type="checkbox"/>
Turning Traffic:	AM: <input type="checkbox"/> Heavy <input type="checkbox"/> Intermittent <input checked="" type="checkbox"/> Light	PM: <input type="checkbox"/> Heavy <input type="checkbox"/> Intermittent <input checked="" type="checkbox"/> Light

**Traffic Behaviour** (Comment or Recommendation Required)

AM:	<input type="checkbox"/> Illegal U-turn	<input type="checkbox"/> Running Red Light	<input type="checkbox"/> Speeding	<input type="checkbox"/> Stopping Non-Compliance	<input type="checkbox"/> Illegal Stopping	<input type="checkbox"/> Illegal Parking	<input type="checkbox"/> Other <input type="text"/>
PM:	<input type="checkbox"/> Illegal U-turn	<input type="checkbox"/> Running Red Light	<input type="checkbox"/> Speeding	<input type="checkbox"/> Stopping Non-Compliance	<input type="checkbox"/> Illegal Stopping	<input type="checkbox"/> Illegal Parking	<input type="checkbox"/> Other <input type="text"/>

**Comments/Conflicts** Indicate the corresponding number(s) as well as additional comment(s)

- intersection functions well. - no conflicts observed. - stopping compliance good when students present.

- students mindful of traffic before crossing. - vehicles courteous to crossing pedestrians, stopping well back of the intersection.

- most students crossed with parents. A few older students crossed on own. - students cross confidently.

- turning traffic very light on east leg. - turning traffic courteous to crossing pedestrians.

- all students and parents pushed the PED button to call up the walk signal before crossing.

- vehicles stopped well back of stop bar when peds present.

- many students crossed south and west legs with the existing crossing guard.

- intersection well marked with ladder markings and stop bars.

**Recommendations** Indicate the corresponding number(s) as well as location and/or school.

