Date: 3/11/15

CITY OF MADISON

Registration Statement - Transit and Parking Commission

You must register before the Commission considers your item.

PLEASE PRINT CLEARLY					
	14	Name (Scott Beni	ett	
Agenda No.	11	Address _	3438 175 /	Highway 1	2
			Madison W	10 5	
Please check the appropriate boxes:					
☐ Support		aı	nd Wish to		
Oppose				vish to speak e to answer questic	ons
N .	pport Nor Oppose			o to answer question	
Speaking Limits:	Public Hearing Information Hearing				
	Other Items				
At this meeting are you representing an organization or a person other than yourself: (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," provide the name of whom you represent below, and go on to the next question.)					
COMMENTS RELATED TO THE ITEM ON THE AGENDA (optional):					
I don't believe that Traffic Engineering has enough resources to handle the					
I don't believe that Traffic Engineering has enough resources to handle their job as authority over cab companies. I see illegal things happenall the first. Second I have been refused access to my background check after several attempts and I don't believe MPD does federal					
fine. Second, I have been refused access to my background check					
after several attempts and I don't believe MPD Loes federal					
background checks.					
Name, address and telephone number of each person or organization you are representing:					
Are you being paid for your representation?					No No
Are you appearing as part of your other paid duties for this person or organization? Yes No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next question.)					