

## **Corporate Services**

## **Council and Administrative Services**

## **Request for Delegation**

Allention	Oit				ngton Street West, Br none: (905) 874-2100		
Meeting:		City Cou Commit Other	uncil ttee of Council	×	Planning & Deve	∍lopment Comr	nittee
Meeting	Date Re	quested:	JUNE 7, 20	)2	Agenda Item (if	applicable): 5.	9 and 11.)
Name of	Individua	ıl(s):	Dr. Micha	iel Ga	guan, B.E.S.	M.C. I.P., R	.P.P
Position/Title:			Managing Principal Planner				
Organization/Person being Represented:					Partnership		ick Rabba)
Full Address for Contact: Gagnon Walker Domes Utd. 21 Quean Street Fast							Street Bust,
			Ster500	Bramp.	ton, Ontari	o LGW	3P1
Telephone No. (905) 796-5790 x 233 Fax No. magagnon@qwdplannevs:com							
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l am sub	mitting a		legation is limited to no resentation to acc	Timere triair in	TO ITIMICATOR	Attach additi	ional page if required.  No
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		er Notebo		DVD PI		PowerPoint	under separate
	Other - I	please sp	pecify See 🛣				to meeting.
Note:	Delegates are requested to provide to the City Clerk's Office well in advance of the meeting date: (i) 25 copies of all background material and/or presentations for publication with the meeting agenda and/or distribution at the meeting, and (ii) for PowerPoint and other visual presentations, an electronic copy of the presentation (e.g., DVD, CD, .ppt file) to ensure compatibility with corporate equipment.  Once the above information is received by the City Clerk's Office, you will be contacted by a Legislative Coordinator to confirm your placement on the appropriate agenda.  al information on this form is collected under authority of the Municipal Act, SO 2001, c.25 and/or the Planning Act,						
							the Planning Act, will be attached to that

agenda. Questions about the collection of personal information should be directed to the Deputy City Clerk, Office of the CAO,

2 Wellington Street West, Brampton, Ontario, L6Y 4R2, tel. 905-874-2115.