



BRAMPTON
Flower City

Chief Administrative Office
City Clerk

Delegation Request

For Office Use Only:
Meeting Name:
Meeting Date:

Please complete this form for your request to delegate to Council or Committee on a matter where a decision of the Council may be required. Delegations at Council meetings are generally limited to agenda business published with the meeting agenda. Delegations at Committee meetings can relate to new business within the jurisdiction and authority of the City and/or Committee or agenda business published with the meeting agenda. **All delegations are limited to five (5) minutes.**

Attention: City Clerk's Office, City of Brampton, 2 Wellington Street West, Brampton ON L6Y 4R2

Email: cityclerksoffice@brampton.ca Telephone: (905) 874-2100 Fax: (905) 874-2119

Meeting: ☒ City Council ☒ Committee of Council ☒ Planning and Development Committee ☐ Other Committee:

Meeting Date Requested: JUNE 20/2022 Agenda Item (if applicable): 5-5

Name of Individual(s): KUNJIT SINGH

Position/Title: RESIDENT OF THE AREA

Organization/Person being represented: CREDIT VALLEY RESIDENTS ASSOCIATION

Full Address for Contact: MAYBECK DRIVE
BRAMPTON, ON

Telephone: _____

Email: _____

Subject Matter to be Discussed:	<u>File # OZS-2020-0029, 1626, 1646 + 1654 QUEEN STREET WEST</u>
Action Requested:	<u>DELEGATE REQUEST</u>

A formal presentation will accompany my delegation: ☐ Yes ☐ No

Presentation format: ☒ PowerPoint File (.ppt) ☒ Adobe File or equivalent (.pdf) ☐ Picture File (.jpg) ☐ Video File (.avi, .mpg) ☒ Other: ORAL

Additional printed information/materials will be distributed with my delegation: ☒ Yes ☐ No ☐ Attached

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) the electronic file of the presentation to ensure compatibility with corporate equipment.

Submit by Email

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Personal information on this form is collected under authority of the Municipal Act, SO 2001, c.25 and/or the Planning Act, R.S.O. 1990, c.P.13 and will be used in the preparation of the applicable council/committee agenda and will be attached to the agenda and publicly available at the meeting and on the City's website. Questions about the collection of personal information should be directed to the Deputy City Clerk, Council and Administrative Services, 2 Wellington Street West, Brampton, Ontario, L6Y 4R2, tel. 905-874-2115.



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Meeting: ☒ City Council ☒ Planning and Development Committee
☒ Committee of Council ☐ Other Committee:

Meeting Date Requested: JUNE 20/2022 Agenda Item (if applicable): 7.4

Name of Individual(s): KULJIT SINGH

Position/Title: RESIDENT OF THE AREA

Organization/Person being represented: CREDIT VALLEY RESIDENTS ASSOCIATION

Full Address for Contact: 57 MAYBECK DRIVE Telephone: (416) 473-7283
BRAMPTON, ON L6X 0Y8 Email: kuljit.janjua@gmail.com

Subject Matter to be Discussed:	<u>File # 025-2020-0036, 1879 QUEEN STREET WEST</u>
Action Requested:	<u>DELEGATE REQUEST</u>

A formal presentation will accompany my delegation: ☐ Yes ☐ No

Presentation format: ☒ PowerPoint File (.ppt) ☒ Adobe File or equivalent (.pdf)
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Meeting: ☒ City Council ☒ Planning and Development Committee
☒ Committee of Council ☐ Other Committee:

Meeting Date Requested: JUNE 20/2022 Agenda Item (if applicable): 7.1

Name of Individual(s): KULJIT SINGH

Position/Title: RESIDENT OF THE AREA

Organization/Person being represented: CREDIT VALLEY RESIDENTS ASSOCIATION

Full Address for Contact: 57 MAYBECK DRIVE Telephone: (416) 473-7283

BRAMPTON, ON L6X 0Y8 Email: kuljit.janjua@gmail.com

Subject Matter to be Discussed:

File # OZS-2021-0018, 1857 QUEEN STREET WEST

Action Requested:

DELEGATE REQUEST

A formal presentation will accompany my delegation: ☐ Yes ☐ No

Presentation format: ☒ PowerPoint File (.ppt) ☒ Adobe File or equivalent (.pdf)
☐ Picture File (.jpg) ☐ Video File (.avi, .mpg) ☒ Other: ORAL

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Meeting: ☒ City Council ☒ Planning and Development Committee
☒ Committee of Council ☐ Other Committee:

Meeting Date Requested: JUNE 20/2022 Agenda Item (if applicable): 5.3 (QUESTIONS/CONCERNS)

Name of Individual(s): KULJIT SINGH

Position/Title: RESIDENT OF THE AREA

Organization/Person being represented: CREDIT VALLEY RESIDENTS ASSOCIATION

Full Address for Contact: 57 MAYBECK DRIVE Telephone: (416) 473-7283
BRAMPTON, ON L6X 0Y8 Email: kuljit.janjua@gmail.com

Subject Matter to be Discussed:

File # OZS-2022-0013, 9224+9230 CREDITVIEW ROAD

Action Requested:

DELEGATE REQUEST

A formal presentation will accompany my delegation: ☐ Yes ☐ No

Presentation format: ☒ PowerPoint File (.ppt) ☒ Adobe File or equivalent (.pdf)
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BRAMPTON, ON L6X 0Y8

Email: kuljit.janjua@gmail.com

Subject Matter to be Discussed:

File # 025-2022-0021, 8265 CHURCHVILLE RD.

Action Requested:

DELEGATE REQUEST

A formal presentation will accompany my delegation: ☐ Yes ☐ No

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