

Chief Administrative Office

City Clerk

Delegation Request

For Office Use Only: Meeting Name: Meeting Date:

		Delega	uon nequ	ucst				
Council may be r meeting agenda.	equired. [Delegatio	for your request to delegate t Delegations at Council meetin ons at Committee meetings ca or agenda business publishe	ngs are generally an relate to new b	limited to age ousiness with	enda busin in the juris	ess published wit diction and autho	h the rity of	
Meeting:		ty Council ommittee of Council		Planning and Other Comm		ment Committee		
Meeting Date Re	equested:	14 June 2023	Agenda Item (i	f applicable)	10.4.3			
Name of Individual(s):		Sylvia Roberts						
Position/Title:		Resident						
Organization/Pe being represente								
Full Address for	Contact			Telephone:				
				Email:				
Subject Matter to be Discusse		erial Zoning Order Request 5	45 Steeles Aven	ue West				
Action Requested:								
A formal presenta	ation will a	accompany my delegation:	🖌 Yes	🗌 No				
Presentation form	nat:	PowerPoint File (.ppt) Picture File (.jpg)	Adobe File	or equivalent (.avi, .mpg)	(.pdf)	Other:		
Additional printed	l informati	on/materials will be distribute	d with my delega	tion: 🗌 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								
. ,		of the presentation to ensure of the presentation to ensure of the city Clerk's			-	Submit by E		
appropriate meeti	ing agend		-					
used in the preparatio City's website. Questi	on of the app ions about th	n, Ontario, L6Y 4R2, tel. 905-874-21	nd will be attached to should be directed to	the agenda and	publicly avail	lable at the meeting a	nd om the	