



City of Cold Lake

Delegation Application

To: The Office of the Chief Administrative Officer

I/We, Eleanor Evans (780) 813-1437 I/We, _____

(Name)

(Telephone Number)

(Name)

(Telephone Number)

Mailing Address Box 607, 5010-50 Ave. Cold Lake, AB T9M 1P2

E-mail Address blisslingerie2@yahoo.com

request to appear as a delegation before Cold Lake City Council at a meeting to be held on JANUARY 14, 2020.

*Please Note: In the event of several delegations, please indicate an alternate date or you will be assigned to the next available meeting.

The purpose of the delegation is to present the following: (see reverse for requirements)

• A copy of all information regarding the topic must accompany the application.

Topic: the safety & security of Cold Lake citizens, businesses & property.

Request: An increase in security to curb the ongoing criminal activity.

* Where the subject matter of a delegation pertains to legal matters, personnel, and/or private property issues, the City of Cold Lake reserves the right not to hear such delegations.

I/We acknowledge that only the above matter will be discussed during the delegation.

Signed [Signature] Date Jan 8/2020

Signed _____ Date _____

Return completed application to the City of Cold Lake

5513-48 Avenue, Cold Lake, AB T9M 1A1

Phone: (780) 594-4494 Ext. 7967

Fax: (780) 594-3480

Email: creimer@coldlake.com

Form 11-00-06

FOR INTERNAL USE ONLY

Request Approved by [Signature]

Date Approved for JAN. 14/20

cc: _____

☐ Other

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Received Fax 08 Jan 20 16:44
Jan. 8, 2020 3:15PM

City of Cold Lake
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