

Email: creimer@coldlake.com

Form 11-00-06

Cold Lake

Delegation Application

To: The Office of the Chief Administrative Officer		
(Name) Telephone Number)	I/We,	
(Name) (Telephone Number)	(Name)	(Telephone Number)
Mailing Address 1106 8 Street Tan 146		
E-mail Address <u>Geo pat 1 can @ gmail. com</u>		
request to appear as a delegation before Cold Lake City Council at a r	neeting to be held on22 Sex	<u>,</u> 20 <u>26</u> .
*Please Note: In the event of several delegations, please indicate an a		
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 ap	plication.	
Verbal presentation as a delegante from	LGVAIC	
Verbul presentation as a delegate from C Signed Support (7 copies)		
		r qu • r
	75-70-1000-1	
* Where the subject matter of a delegation pertains to legal matters, personal hear such delegations.	nel, and/or private property issues, the (City of Cold Lake reserves the right not to
I/We acknowledge that only the above matter will be discussed during	the delegation.	RNAL USE ONLY
Signed Safayla Date 15/9/2020	n Request A	pproved by
SignedDate	Date Appl	roved for SEPT. 22/20
Return completed application to the City of Cold Lake	cc:	
5513-48 Avenue, Cold Lake, AB T9M 1A1	□ Other	
Phone: (780) 594-4494 Ext. 7967 Fax: (780) 594-3480		

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