

Email: creimer@coldlake.com

Form 11-00-06

Cold Lake

Delegation Application

To: The Office of the Chief Administrative Officer	
I/We, KEVIN/ADAMKICKI FBD 545-44/1/We,	180 545-9933
(Name) (Telephone Number) (Nam	e) (Telephone Number)
Mailing Address 4HH HZ119 TWP RD 614 TO 190	OX ZUB COLD LAKE TAYLING
E-mail Address <u>Peniol Dymailicom</u>	
request to appear as a delegation before Cold Lake City Council at a meeting to be held on 1200, 2024.	
*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.	
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To Council. My son day of hungain Desagnity BAD	
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ATTALED EMPROYABILITIES.	
* 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.	FOR INTERNAL USE ONLY
Signed Date 4 feet 2074	Request Approved by
Signed COCCOUND Date 4001 1004	Date Approved for
Return completed application to the City of Cold Lake	cc:
5513-48 Avenue, Cold Lake, AB T9M 1A1 Phone: (780) 504 4404 Fyt. 7067	□ Other
Phone: (780) 594-4494 Ext. 7967 Fax: (780) 594-3480	

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