



550-0741
CORPORATION OF THE TOWNSHIP OF ESQUIMALT
For Information: 1229 Esquimalt Road
☐ CAO ☐ Mayor/Council
Esquimalt BC V9A 3P1
PHONE: 250-414-7100
RECEIVED: NOV 19 2015 FAX: 250-414-7111
www.esquimalt.ca

DELEGATION

APPLICATION TO APPEAR AS A DELEGATION BEFORE COUNCIL

☐ COTW

☐ For Report

☒ Council Agenda

☐ IC

An individual or a delegation may address Council on the subject of an Agenda item, each limited to **5 minutes**.
(See back for excerpt of the Council Procedure Bylaw)

Please submit the completed application **by Noon on Wednesday prior to the preferred Council meeting**, by: (1) email to corporate.services@esquimalt.ca, (2), mail or hand deliver to Municipal Hall, address above, or (3) fax to 250-414-7111. For further information, contact the Corporate Officer at 250-414-7135 or corporate.services@esquimalt.ca.

Name(s): PHILIPPA CATLING + SUSAN GAGE

Organization (if applicable): _____

Daytime Phone No _____

Email: _____

Preferred Date of Council meeting: December 7th 2015
(Staff will telephone or email to confirm the meeting date once it is scheduled.)

Reasons for Wishing to Appear as a Delegation (Please Specify): We wish to request Council's support and endorsement of our plan to form an Esquimalt Constituent Group for the purpose of sponsoring a refugee family.

Will you be presenting a Petition to Council? ☒ Yes ☐ No

November 18th 2015
Date of Application

[Signature]
Signature

Susan Gage

Date Received: _____

FOR OFFICE USE ONLY

Date Presented to Council: _____

APPLICANT
CONTACTED ☒ Email
DATE: Nov 23 2015
INITIALS: PO