



## Request for Delegation

RECEIVED

Attention: Municipal Clerk  
Township of Cramahe  
1 Toronto St., P.O. Box 357  
Colborne, ON K0K 1S0  
Email: clerk@cramahetownship.ca  
Phone: 905-355-2821 ext. 222  
Fax: 905-355-3430

FOR OFFICE USE ONLY SEP 02 2025

Meeting Name: \_\_\_\_\_

Meeting Date: \_\_\_\_\_

Name of Individual(s): DAVE FORSYTH Request Date: SEPT 9/25

Position/Title: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Phone Number: 905 373 5978 Extension: \_\_\_\_\_ Fax: \_\_\_\_\_

Reason(s) for delegation request (subject matter to be discussed):  
ASK FOR A FISCAL OFFSET BYLAW

I am submitting a formal presentation to accompany my delegation:

☒

Yes

☐

No

I will require the following audio-visual equipment/software for my presentation:

☐

Projector

☐

PowerPoint

*\*Note: Delegates are requested to provide 10 copies of all background material/presentations to the Clerk's Division 5 business days prior to the meeting date so that it can be included with the agenda package.*

In accordance with Procedural By-law 2007-10:

- Delegates appearing before Cramahe Council or Committee are requested to limit their remarks to 8 minutes and 10 minutes respectively (approximately 5/10 slides).

Once the above information is received in the Clerk's Division, you will be contacted by staff to confirm your placement on the appropriate agenda. Thank You.

### Notice With Respect to the Collection of Personal Information (Municipal Freedom of Information and Protection of Privacy Act)

Personal Information contained on this form is authorized under Section 3.4 of the Township of Cramahe Procedural By-law 200710, for the purpose of contacting individuals and/or organizations requesting an opportunity to appear as a delegation before Council or a Committee of Council. The Delegation Request Form will be published in its entirety with the public agenda. The Procedural By-law is a requirement of Section 238(2) of the *Municipal Act, 2011*, as amended.

Please note that all meetings are open to the public except where permitted to be closed to the public under legislated authority.

Signature of Delegate: [Signature] Witness (Twp. Staff): \_\_\_\_\_

Date: SEP 2/25