The Corporation	SCHEDULE "E" ion of the Village of Salmo N APPLICATION FORM			
Delegate(s) Name:				
Mailing Address:				
Email Address:	Phone No.:			
Delegation Status: (select one)				
[ ] Representing a Group/Organization/Business				
[ ] Attending as an Individual	(Name of Group/Organization/Business)			
Council Date Requested for Meeting:				
Purpose of the Delegation Request:	_			
<ul> <li>Note:</li> <li>A copy of all information regarding the presentation <b>must</b> accompany this application.</li> <li>Delegation requests are subject to approval by the Mayor and Corporate Officer. Submission of an application is not a guarantee that you will be approved to appear before Council. Where the subject matter of a delegation pertains to legal matters, personnel, and/or private property issues, the Village of Salmo reserves the right not to approve the delegation.</li> <li>The Village of Salmo cannot guarantee you will be scheduled on the date requested</li> </ul>				
I/We acknowledge that only the above matter will be discussed during the presentation:				
Signature:	Date:			
This information is collected by the Village of Salmo in accordance with Section 124 of the <i>Community Charter</i> and is protected under the <i>Free-</i> <i>dom of Information and Protection of Privacy Act</i> . The information will be used to facilitate processing this request to appear as a delegation be- fore Council. Should you have any questions about the collection of this personal information, please contact the Village of Salmo, Corporate Of- ficer at 250.357.9433. The applicant, in the process of submitting or authorizing this application, hereby recognizes and accepts that this material will become available to the public as part of the application, review and approval process. Applicant's Initials				
Return completed form along with the information regarding the presentation to the Corporate Officer either by mail, in person, by fax, or by email				
Completed forms can be faxed to (250)357-9633 or emailed to info@salmo.ca				

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FOR OFFICE USE ONLY						
Delegation Approved?	Y N	Scheduled for	Council Meeting on	, 20		
Reason not approved:						
Response sent to requestor by:	letter	email	on	_, 20		