



Village of Cache Creek
 1389 Quartz Road, Box 7
 Cache Creek, BC V0K1H0
 250-457-6237
admin@cachecreek.info

Delegation Request

The personal information you provide on this form is collected under the provisions of sections 26 (c) and 27 (2) of the Freedom of Information and Protection of Privacy Act (FIPPA) and will be used to process your application to appear as a delegation before Cache Creek Council. The purpose and legal authority for collecting this information is to comply with the provisions of the Community Charter section 97 (1) (b). Should you have any questions or concerns regarding the collection of this information, please contact the Chief Administrative Officer of the Village of Cache Creek.

Delegations are heard at a public Council meeting. **If this request is approved, Page 1 of the completed Delegation Request will be included in the meeting's agenda package.** Any background information you or your organization includes with this Delegation Request may also be included in the agenda package. The presenter's name/s, the name of the group being represented (if there is one), a summary of the presentation and any resulting discussion will be included in the minutes of that meeting. Both the agenda package and the minutes will be posted on the Village's public website. The information provided on Page 2 will not be released except in accordance with the FIPPA.

Please note that submission of this form does not guarantee the approval of your request to appear before Council. The Village office will contact you as soon as possible to let you know if your Delegation Request has been approved. All delegation requests are subject to the provisions outlined in the Village of Cache Creek Procedure Bylaw No. 744, 2010 or its replacement. This Delegation Request form and any background information for consideration by either Council or Committees of Council must be submitted to the Village office on or before:

12:00 Noon on the Wednesday prior to the Requested Meeting Date

Council/Committee Meeting Date:	
Subject:	
Name of Spokesperson:	
Name of Group or Person(s) being Represented (if applicable):	
Brief Summary of Issue or Purpose of Delegation:	
Please complete the following:	
Have you been in contact with a Village staff or Council member regarding your matter of interest?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, with whom?	Date:
<input type="checkbox"/> I acknowledge that the Procedure By-law permits fifteen (15) minutes for Delegations.	

Contact Information:

Name: _____

Address: _____

Street Address

Town/City

Postal Code

Phone: _____ **Fax:** _____

Email: _____ **Website:** _____

Will you require a projector and screen ?