



## Deputation to Council

cl.5.9 of Shire of Toodyay Standing Orders Local Law 2008

### DEPUTATION DETAILS

I /  We wish to apply to be received by the Shire of Toodyay Council at the next:

Council Meeting to be held on: \_\_\_\_\_

Committee Meeting to be held on: \_\_\_\_\_

**Regarding Agenda Item Name & No:** \_\_\_\_\_

Deputation Spokesperson(s) name: \_\_\_\_\_

Deputation will be speaking:  In support of the recommendation set out in the report  
 In opposition of the recommendation set out in the report

The purpose of the deputation is:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Add an A4 page to provide further information*

### APPLICANT DETAILS

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Postal Address (if different): \_\_\_\_\_

Organisation representing (if applicable): \_\_\_\_\_

Contact Phone No(s.): \_\_\_\_\_

Email: \_\_\_\_\_

### OFFICE USE ONLY

CEO approved  Shire President approved  Referred to \_\_\_\_\_

The matter was referred to:  Council; or  : \_\_\_\_\_ Committee for a determination

Deputation minuted  Council approved Resolution Number: \_\_\_\_\_

