

100 John West Way Aurora, Ontario L4G 6J1 (905) 727-3123 aurora.ca

## **Delegation Request**

This request and any written submissions or background information for consideration by either Council or Committees of Council is being submitted to Legislative Services.

Council or Committee (Choose One) *	Council or Committee Meeting Date * ?	
Heritage Advisory Committee	2025-2-3	<b>#</b>
Subject *		
The Aurora Armoury Provincial Plaque		
Full Name of Spokesperson and Name of Group or Per	rson(s) being Represented (if applica	ble) *
Christopher Watts, The Aurora Heritage Authority		
Brief Summary of Issue or Purpose of Delegation *		
To review an item previously before the Heritage Adv pending list for nearly a decade has failed to return, in to council to correct the plaque that has stood in error	the hopes that the committee will rec	• .
Have you been in contact with a Town staff or Council • Yes	member regarding your matter of into	erest? *
Full name of the Town staff or Council member with whom you spoke  Adam Robb	Date you spoke with Town staff o	r a Council member
	2025-1-27	<b>m</b>

I acknowledge that the Procedure By-law permits five (5) minutes for Delegations. ★ Agree