



100 John West Way
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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

Council or Committee Meeting Date * 

2025-3-18



Subject *

14553 Yonge St - man shelter

Full Name of Spokesperson and Name of Group or Person(s) being Represented (if applicable) *

Costabile Carpinelli

Brief Summary of Issue or Purpose of Delegation *

Talking about the 14552 Yonge st man shelter proposal

Have you been in contact with a Town staff or Council member regarding your matter of interest? *

Yes

No

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

Agree