***PLEASE COMPLETE SECTION 1 ONLY***

|  |  |
| --- | --- |
| **SECTION 1** | **Request No:**  |
| **Date (date of request)** | **Title of Request** |
| **Person making request (your name)** | **Representing (your title or role)** |
| **Background (explain background of this request – attach relevant documents)** |
| **Communications/Key Messages** |
| **Request: (clearly state the action Council is being asked to take)** |

***SECTION 2 - FOR OFFICE USE ONLY***

|  |  |
| --- | --- |
| **Advantages** | **Disadvantages** |
| **Required Resources** |
| **Staff Comments** |
| **CAO Review/Comments** |