

M O T I O N

Committee Date:

MOVED BY COUNCILLOR

SECONDED BY COUNCILLOR.....

Re: [Insert name of organization applying for fee waiver here]

**WHEREAS [Insert name of organization applying for fee waiver here]
has a long history of providing [Insert type of service or programs
organization provides here];**

**WHEREAS [Insert name of organization applying for fee waiver here]
has demonstrated [Insert additional rationale for fee waiver here if
applicable];**

THEREFORE be it resolved:

**That the [Insert name of fee and location of facility here] be
waived/reduced for [Insert name of organization applying for fee waiver
here] ...for... [insert date of waiver/reduction here or time period for
which waiver\reduction is applicable].**