

BYLAW REFERRAL FORM RESPONSE SUMMARY

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Approval Recommended for Reasons Outlined Below

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Approval Recommended Subject to Conditions Outlined Below

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Interests Unaffected by Bylaw

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Approval Not Recommended Due to Reason Outlined Below

Salt Spring Island Trust Area
(Island)

J. Chonk
(Signature)

(Date)

553
(Bylaw Number)

(Print Name & Title)

(First Nation/Agency)