

# **The Corporation of the City of Kawartha Lakes**

## **Additional Agenda**

### **Regular Council Meeting**

**CC2020-08**

**Thursday, August 20, 2020**

**Open Session Commencing at 1:00 p.m. - Electronic Public Participation**

**Council Chambers**

**City Hall**

**26 Francis Street, Lindsay, Ontario K9V 5R8**

#### **Members:**

**Mayor Andy Letham**

**Deputy Mayor Patrick O'Reilly**

**Councillor Ron Ashmore**

**Councillor Pat Dunn**

**Councillor Doug Elmslie**

**Councillor Tracy Richardson**

**Councillor Kathleen Seymour-Fagan**

**Councillor Andrew Veale**

**Councillor Emmett Yeo**

**Note: This will be an electronic participation meeting and public access to Council Chambers will not be available. Please visit the City of Kawartha Lakes YouTube Channel at <https://www.youtube.com/c/CityofKawarthaLakes> to view the proceedings.**

**Accessible formats and communication supports are available upon request. The City of Kawartha Lakes is committed to accessibility for persons with disabilities. Please contact [AgendaItems@kawarthalakes.ca](mailto:AgendaItems@kawarthalakes.ca) if you have an accessible accommodation request.**

**6. Deputations**

*6.2	CC2020-08.6.2	3 - 5
	<b>Proposed Rezoning to Permit the Staging of Commercial Outdoor Role Playing Games at 36 Walker's Road, Verulam</b> <b>(Related to Item 9.1 on the Agenda)</b> Beverly Saunders, EcoVue Consulting Services Inc.	
*6.3	CC2020-08.6.3	6 - 8
	<b>Proposed Rezoning to Permit the Staging of Commercial Outdoor Role Playing Games at 36 Walker's Road, Verulam</b> <b>(Related to Item 9.1 on the Agenda)</b> Larry Junkin	
*6.4	CC2020-08.6.4	9 - 11
	<b>Use of Off Road Vehicles on Boundary Roads</b> <b>(Related to Item 10.1.4 on the Agenda)</b> Heather Stauble	



# Request to Speak before Council

Request to Make a Deputation/Presentation to  
Council/Committee  
City of Kawartha Lakes  
City Clerk's Office  
26 Francis Street, PO Box 9000  
Lindsay, ON K9V 5R8  
705-324-9411

**Name: \***

Beverly Saunders

**Address: \***

311 George Street North, Suite 200

**City/Town/Village:**

Peterborough

**Province: \***

ON

**Postal Code:**

K9J 3H3

**Telephone: \***

705-876-8340

**Email: \***

bsaunders@ecovueconsulting.com

There can be a maximum of two speakers for each deputation. Please list the name(s) of the individual(s) who will be speaking. The names that are listed here will be included on the Council Meeting Agenda.

**Deputant One:**

Beverly Saunders

**Deputant Two:**

**Please provide details of the matter to which you wish to speak: \***

Requesting to speak regarding CKL File D06-2019-018

Please attach any additional supporting documents you wish to provide and submit with this completed form.

**Have you discussed this matter with City Staff?**

☒ Yes

☐ No

**If yes, Which department and staff member(s) have you spoken to?**

Sherry Rea - Development Services, Planning Division

**What action are you hoping will result from your presentation/deputation? \***

Remove the language in the draft by-law suggesting a 3 year timeline for Site Plan Approval and instead permit the proposed continued use to be permanent with a Site Plan requirement only in the event that uses beyond the "continued use" are proposed.

By signing this form you are acknowledging that all of the information you are providing on this form is true, and giving the City permission to collect your personal information for the principal purpose of a request to make a deputation to Committee or Council as outlined below.

**Signature:**



**Date:**

August 17, 2020

The personal information is being collected by the City of Kawartha Lakes for the principal purpose of a request to make a deputation to Committee or Council pursuant to the City's procedural by-law. This information, including all attachments submitted may be circulated to members of Council, staff, the general public and posted on the City website. Questions about the collection of this information should be directed to the City Clerk or Deputy Clerk at 705 324-9411 ext. 1295 or 1322.

**Do you understand how your information will be used and agree to allow the City to use your personal information provided on this form, including any attachments for the purposes of requesting to make a deputation to Committee or Council? \***

☒ Yes

Please complete this form and return to the City Clerk's Office by submitting it online or:  
Fax: 705-324-8110 Email: [agendaitems@kawarthalakes.ca](mailto:agendaitems@kawarthalakes.ca)



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City Clerk's Office  
26 Francis Street, PO Box 9000  
Lindsay, ON K9V 5R8  
705-324-9411

**Name: \***

Larry Junkin

**Address: \***

[REDACTED]

**City/Town/Village:**

[REDACTED]

**Province: \***

[REDACTED]

**Postal Code:**

[REDACTED]

**Telephone: \***

[REDACTED]

**Email: \***

[REDACTED]

There can be a maximum of two speakers for each deputation. Please list the name(s) of the individual(s) who will be speaking. The names that are listed here will be included on the Council Meeting Agenda.

**Deputant One:**

Larry Junkin

**Deputant Two:**

First Name, Last Name

**Please provide details of the matter to which you wish to speak: \***

Plan 2020-025, rezoning of 36 Walkers Road,

Please attach any additional supporting documents you wish to provide and submit with this completed form.

**Have you discussed this matter with City Staff?**

☒ Yes

☐ No

**If yes, Which department and staff member(s) have you spoken to?**

**What action are you hoping will result from your presentation/deputation? \***

Clarification of change in application details

By signing this form you are acknowledging that all of the information you are providing on this form is true, and giving the City permission to collect your personal information for the principal purpose of a request to make a deputation to Committee or Council as outlined below.

**Signature:**

Larry Junkin

**Date:**

8/17/2020



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City Clerk's Office  
26 Francis Street, PO Box 9000  
Lindsay, ON K9V 5R8  
705-324-9411

**Name: \***

Heather Stauble

**Address: \***

37 Manvers Station Road

**City/Town/Village:**

Pontypool

**Province: \***

ON

**Postal Code:**

L0A 1K0

**Telephone: \***

705-324-9411

**Email: \***

heatherstauble@hotmail.com

There can be a maximum of two speakers for each deputation. Please list the name(s) of the individual(s) who will be speaking. The names that are listed here will be included on the Council Meeting Agenda.

**Deputant One:**

Heather Stauble

**Deputant Two:**

First Name, Last Name

**Please provide details of the matter to which you wish to speak: \***

Information and background 10.1.4

Please attach any additional supporting documents you wish to provide and submit with this completed form.

**Have you discussed this matter with City Staff?**

☐ Yes

☒ No

**If yes, Which department and staff member(s) have you spoken to?**

**What action are you hoping will result from your presentation/deputation? \***

Receive Report. No action.

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**Signature:**

Heather Stauble

**Date:**

8/18/2020



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☒ Yes

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