

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: *		
T. June Jackson		
Address: *		
Box 488, 22 Alma St.		
City/Town/Village:	Province: *	Postal Code:
Omemee	On.	KOL 2WO
Telephone: *	Email: *	t ff yzs, Whien repertment and
705-799-6019	@gmail.com	
There can be a maximum of two speake who will be speaking. The names that ar Deputant One:		
First Name, Last Name		
į.		
Deputant Two:		
First Name, Last Name		

I would back o	my ditch bside my house & the		
l lived l March.	ad a collapsed culvert at McFauls in		
In 2016 of the o	ny change in elevation or lowering etter.		
was to		he frozen water in the ditch & in March p person. On Sept. 12 I was told it was I be taken.	
	attach any additional sup	porting documents you wish to provide a	and submit with this completed form
			and submit with this completed form
ave yo	attach any additional sup ou discussed this matt	er with City Staff?	
ave yo Yes No	attach any additional sup ou discussed this matt	er with City Staff?	Boy ASB 22 Atma St. Lity/Town/Village: Conside
ave yo Yes No	attach any additional sup ou discussed this matt	er with City Staff?	
Yes No	attach any additional sup ou discussed this matt	er with City Staff? staff member(s) have you spoken to	Sov ASB 22 Alma St. Ity/Town/Village: Consones elephone: Sov ASB 22 Alma St.
ave you Yes No yes, W	attach any additional sup ou discussed this matt Which department and ction are you hoping we	er with City Staff?	eutation?*

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	1	
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T. June Jackson

Date:

8/27/2019



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