

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:

| Sylvia Keesmaat | |
|-----------------|---|
| | - |

Deputant Two:

First Name, Last Name

Flato's request to coucil for an MZO.

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?

That council will decline this request.

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:

Sylvia Keesmaat

Date:

10/14/2021

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.

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Do you agree to the publication of your contact information (including your address, telephone number and email) on the City's website as part of a meeting agenda? *

🕞 Yes

🔿 No

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