

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: *

Barb Mildon

Address: *

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City/Town/Village:	Province: *	Postal Code:
Lindsay	ON	K9V 5Z6
Telephone: *	Email: *	
	bmildon@ccckl.ca	a

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:

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Deputant Two:

First Name, Last Name

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

On November 16th, 2021 Council will consider a request from Community Care, City of Kawartha Lakes (CCCKL) to reduce or waive the Development Charges related to the construction of our new Community Health Centre at 21 Angeline St. North. My deputation would provide a brief overview of the background and context prompting our request and to extend my thanks to the Mayor and Council for their support to CCCKL over our 35-year history.

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?*

Reduction in whole or in part of our Development Charges.

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:

Barb Mildon

Date:

11/1/2021

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