



Request to Speak before Council

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JUN 24 2022

**OFFICE OF THE CITY CLERK
KAWARTHA LAKES**

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: *

LAURIE ANDERSON

Address: *

[Redacted Address]

City/Town/Village:

[Redacted City/Town/Village]

Province: *

[Redacted Province]

Postal Code:

[Redacted Postal Code]

Telephone: *

[Redacted Telephone]

Email: *

[Redacted Email]

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:

LAURIE ANDERSON

Deputant Two:

MICHELLE NEWMAN

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

THE ROAD ALLOWANCE DIRT THAT WAS EXCAVATED BY THE SNOWMOBILE ASSOC. AND PLACED NEXT TO MY DRIVEWAY IN FRONT OF MY PROPERTY.

KEEPING CEDAR RAIL FENCE THAT ACTS AS A BUFFER FOR 5' 3" DROP, IT ALSO DEFINES THE ENTRANCE FOR THE DRIVEWAY.

SECONDARY FUNCTION TO DETER ATV'S FROM USING THE WEST SIDE OF ROAD ALLOWANCE, AND TO PROTECT THE INTEGRITY OF THE DRIVEWAY.

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?

DAVID BROMWELL, REALTY CHRISTINE OLIVER, BYLAW RYAN ALLAN
CLERKS OFFICE ASHLEY AND SARAH. EMAILED DOUG ELMSLIE

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

TO REMOVE THE ALTERATION OF THE ROAD ALLOWANCE,
THE SNOWMOBILE ASSOC. COMMITTED TO DIRT'S REMOVAL,
WHICH STILL HASN'T BEEN DONE. AND TO SEEK A LICENCE FOR
THE FENCE.

IF COUNSEL DECIDES TO REMOVE MY FENCE I WOULD LIKE
ASSURANCES FROM COUNSEL, THAT MY DRIVEWAY WILL NOT
BE DAMAGED, OR RECOURSE TO HAVE THE DRIVEWAY REPAIRED.
I HAVE WITNESSED SUCH DAMAGE ON THE FOLLOWING ON 121.
HOUSE #1961, 1295, 1802, 1189, 1649, 1633 AND 1090.

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:

Liam Anderson

Date:

06 15 22

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 agree to the publication of your name and contact information on the City's website and the City Council 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