

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:*		
Neil Evans		
Address: *		
City/Town/Village:	Province: *	Postal Code:
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Telephone: *	Email: *	
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There can be maximum of two speakers for each deputation. I speaking. The names that are listed here will be included on t	Please list the name(s) of the individue to the lindividue to the council Meeting Agenda: *	dual(s) who will be
Neil Evans		
Please provide details of the matter to which you wish to spea in regards to the report on Gerbage pick on Shadow Lake Rd 2	k: *	
III regalus to the report on Garbage pick on Shadow Lake 1/4 2		
What action are you hoping will result from your presentation	/deputation? *	
Garbage pick up at each address on the road or a reduction of taxes equal to the amount paid		
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Signature:	Date:	
	Ocotber 2 2017	
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Please complete this form and return to the City Clerk's Office: Fax: 705-324-8110 Email: agendaitems@kawarthalakes.ca

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 Section 10 of City of Kawartha Lakes By-law 2014-266. This information may be circulated to members of Council, staff and the general public. 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

