

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: *		
Address: *		
Address.		
City/Town/Village:	Province: *	Postal Code:
Telephone: *	Email: *	
There can be a maximum of two speak who will be speaking. The names that a		
		0 0
Deputant One:		
Christa Blanchard		
Deputant Two:		
First Name, Last Name		

Please provide details of the matter to which you wish to speak: *
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react provide detaile or the matter to which you went to opean.	
I am speaking on behalf of my family and community. I am looking to revisit and amend the chicken coop pilot program to allow people with smaller properties to be able to participate in the program. With the rising cost of living, especially groceries its becoming harder and harder for families to stay afloat. By allowing us to raise and grow our own food in a reasonable manor it can take some of that financial strain off our citizens.	
I look forward to speaking before you and being a voice for all the other homesteaders who are trying to make a difference and provide for their families who don't have an abundance of land.	
Thank you,	
Christa	
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	
If yes, Which department and staff member(s) have you spoken to?	

We are hoping to reboot the chicken coop pilot project with certain amendments. We're hoping to be able to keep our chickens as well as allow other families to rise chickens so we can provide nourishing food for our families. How would you like to complete your deputation?* Electronically Using Zoom 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: Christa B Date:	What action are you hoping will result from your presentation/deputation? *
Electronically Using Zoom 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: Christa B Date:	able to keep our chickens as well as allow other families to rise chickens so we can provide nourishing
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Date:	
10/28/2023	Date:
	10/28/2023

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 clerks@kawarthalakes.ca.

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

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

○ No