

# 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: *		
Gene Balfour		
Address: *		
City/Town/Village:	Province: *	Postal Code:
Telephone: *	Email: *	
There can be a maximum of two spea who will be speaking. The names that		
Deputant One:		
Gene Balfour		
Deputant Two:		
Kerstin Kelly		

lease attach any additional supporting documents you wish to provide and submit with this orm.	s completed
ave you discussed this matter with City Staff?	
fives Which deportment and staff member(s) have you engken to 2	
f yes, Which department and staff member(s) have you spoken to?	

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

I made several suggestions for the use of the Rural Zoning Final Document during the deputation to Council I made last Fall. I believe these to be fair to all parties involved - property owners, City staff and for improving the reputation of the CKL as a desireable place to live, work and invest. I also wanted the definition of "person" in the final report to be amended.

I have no idea if any of the above has been, or is currently being considered. My concerns on this topic are shared by many CKL property owners and were presented as a Deputation so that they would be officially registered with City Council in a COW public meeting. My current deputation request is to use the same forum to follow up on the first deputation so that CKL constituents can learn if Council and CKL staff are taking our concerns as seriously as we are.

I hope Council will be prepared to respond with concrete feedback on this matter that will demonstrate their commitment to serve and protect property owners from unwanted and unintended consequences if the Final Report passes into law without there concerns and suggestions being considered to benefit all stakeholders.

# How would you like to complete your deputation? \*

In Person in Council Chambers

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:

Gene Balfour

### Date:

1/22/2024



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