

REQUEST TO APPEAR AS A DELEGATE TOWN OF NIAGARA-ON-THE-LAKE

(PLEASE PRINT CLEARLY OR TYPE ON THIS FORM)

Name: S.C. WATSON.	E-mail: in to esc	watson.cq.
Street: Co~ 7	Box # / RR #:4 1085	Phone #: 988 5709
City: NOTC.	Postal Code: LOS /SO	
Non Agenda Delegation - a preser COTW Agenda and for which no relater than 12 p.m. on the Thursday () Agenda Delegation - a presentation	eport has been prepared for Cou prior to the COTW or Council N	uncil by Staff must be submitted no Meeting
THE ALTERNATIVE OPTION	OF THE LAMENTORAL	LUDED IN THE DRAIN
THE CONSULTANT IGNORIA	NG LANDOUNERS IN	PUT & THE ZOOK COS
If an applicant wishes to address an issue be permitted to do so if they bring forward is new must be identified below and is s significant new information has not been p	significant new information. Sp subject to approval by the Tow	pecific details on how this information
□ (✓) I have spoken on this issue before as follows: (attach a separate page	re, and the specific new infor e(s) if necessary)	mation I wish Council to review is
I wish to appear before Council on Meeting time is 6:00 p.m. unless otherwise Note: Your request must be made no later	noted)	DATE he schedule meeting.
I wish to appear before Committee of th		······································
(Meeting time is 6:00 p.m. unless otherwise		DATE
☐ Community & Development Services ☐ Note: Your request must be made no later	Corporate Services ☐ Operation than 12:00 p.m. on the day of the	ns-Parks & Recreation/Public Works he schedule meeting.
I have read and understand the Delegation contained on this form, including any attack Agendas.	n Protocol on the back of this fo chments, will become public doc	rm and acknowledge the information cuments and listed on Town Meeting
I also understand presentation material presentations must be emailed to peter.tod meeting.	d@notl.com no later than 12:00	p.m. on the day of the schedule
sche.	FEB 1	18/20 · Date
Signature		
Presentation Requirements: No You	es (description) MAPS \$	PROPOSED PLAN.