

From: no-reply@web-response.com on behalf of [Town of Niagara-on-the-Lake](#)
To: [Clerks](#)
Subject: Webform submission from: Delegation Request Form
Date: January 24, 2024 11:02:38 AM

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Submitted on Wed, 01/24/2024 - 11:02

Information

Name

Steven Soos

Address

[REDACTED]

Email Address

[REDACTED]

Telephone Number

Cell: [REDACTED]

Presentation

Agenda Delegation

Non Agenda Delegation

Topic

I have spoken on this issue before, and would like to provide specific new information I wish Council to review

The specific new information I wish Council to review is as follows:

Mental Health and Addiction:

-NOTL Town Council declare mental health and addiction a crisis and asks the Ontario-government to declare an Ontario-wide state of emergency on mental health and addiction.

On mental health:

-NOTL Town Council advocates to all levels of government to increase access to mental health and crisis services.

On addiction:

-NOTL Town Council advocate to the Ontario government for more drug treatment centers/beds for Niagara Region.

-NOTL Town Council ask Niagara Region to consider a public health campaign on the dangers of opioids and more public education and awareness on poison supplies in Niagara Region.

Terms

I have read and understand the Delegation Protocol and acknowledge the information contained on this form, including any attachments, will become public documents and listed on Town Meeting Agendas. I also understand presentation materials including speaking notes and electronic presentations must be submitted by email to clerks@notl.com no later than 12:00 p.m. on the Monday prior the scheduled meeting.

Yes

Meeting Time

I wish to appear before:

Council

Date

Tue, 02/27/2024 - 00:00

Presentation Requirements

Do you have a presentation?

No

I agree

Yes

Delegation

I will be appearing:

Virtual

I also understand presentation materials including speaking notes and electronic presentations must be submitted by email to clerks@notl.com no later than 12:00 p.m. on the Monday prior to the scheduled meeting.

Yes

I acknowledge I have 10 minutes to delegate

Yes

I give permission to be audio and video recorded on the Town of Niagara on the Lake's livestream

Yes

Do you require accessible accommodation to participate:

No

Privacy Disclaimer

I have read and understand the above Privacy Disclaimer.

Yes