

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

(PLEASE PRINT CLEARLY OR TYPE ON THIS FORM)

Name: Waldy Wall	E-mail: waldy@landscapeflorida.ca		
Street: 631 Lincoln Avenue	Box # / RR #:	Phone #:	
City: NOTL	Postal Code:	Fax #:	
✓(□) Non Agenda Delegation - a present COTW Agenda and for which no replater than 12 p.m. on the Thursday	oort has been prepared to prior to the COTW or Co	or Council by Staff must be submit uncil Meeting	tted no
✓(□) Agenda Delegation - a presentation	which specifically addre	sses a COTW or Council Agenda i	tem.
□ (✓) I have never spoken on this issue		nts of my presentation are as fol	lows:
This consent was supported by the Co		property on way begins	
The consent is to include my geotherma			
The geothermal system provides heating			
The only place I could locate the geother	ermal is in the current	ocation. It has been in place fo	or >10 yr
If an applicant wishes to address an issue be permitted to do so if they bring forward s is new must be identified below and is si significant new information has not been pro-	significant new informati ubject to approval by tl	on. Specific details on how this in	formation
□ (✓) I have spoken on this issue before as follows: (attach a separate page)		v information I wish Council to i	review is
I wish to appear before Council on Sept	ember 27, 2021	·	
Meeting time is 6:00 p.m. unless otherwise Note: Your request must be made no later		DATE ay of the schedule meeting.	
I wish to appear before Committee of the	Whole on		
(Meeting time is 6:00 p.m. unless otherwise	noted)	DATE	
☐ Community & Development Services ☐ (Note: Your request must be made no later)			ic Works
I have read and understand the Delegation contained on this form, including any attacl Agendas.			
I also understand presentation materials presentations must be emailed to clerks@n meeting.			
_Waldy Wall	Septemb	er 24, 2021	Ø
Signature	• • • • • • • • • • • • • • • • • • • •	Date	
Presentation Requirements: No Ye	es (description)		*