

# Request to Speak at a Meeting

If you are interested in appearing in person at a Council or Standing Committee meeting to present information or an opinion on a matter, please fill in the form below.

**Full Name \***

Matt Campbell

**Phonetic Pronunciation of Name**

5198086737

**Pronouns**

**Mailing Address \***

318 Wellington Rd

**Email Address \***

matt.c@zpplan.com

**Phone Number \***

5198086737

**Contact Preference \***

- Email
- Telephone

**Who are you representing? \***

- Myself
- Group or Organization
- Another Individual

**Name of Individual being Represented (If Applicable)**

Brantwood Homes Inc.

Address of Individual being Represented (If Applicable)

Phone Number of Individual being Represented (If Applicable)

Township/Town/City \*

Postal Code \*

Will you require an accessibility accommodation? \*

Yes

No

## Presentation Details

Requested Meeting Type \*

Requested Meeting Date \*

 

Is this delegation request in relation to an agenda item? \*

Yes

No

How would you prefer to attend this meeting? \*

In-Person

Online

Subject of Delegation \*

**Have you presented on this topic before? \***

- Yes  No

**What is your position on this issue/agenda item? \***

- In Favour  Opposed  Other

**Please provide the key points of your presentation. \***

I will provide additional information to Council in support of a request for extension of Draft Plan of Condominium approval for the lands at 167 St. Catherine Street in Smithville. It will be a verbal presentation only.

**Are you expecting an action and/or recommendation from Council in response to your presentation? \***



- Yes  No

**Please explain what response you would like to see from Council. ?**

We would like to see Council provide an extension of up to 3 years.

**Do you have an electronic presentation? \***

- Yes  No

**Please provide any additional comments you may have in regards to your delegation request.**

We intend to provide a letter for Council's review prior to the meeting date.

**Acknowledgements and Consent \***

- I understand that I only have ten (10) minutes to present.
- I understand that I can only address Council on the same issue once.
- I understand that inappropriate behaviour, action and/or treatment of Council and/or staff will not be permitted before, during or after my presentation.
- I understand that delegations are approved on a first come first serve basis, with a maximum of four being allowed per meeting, and that submission of a delegation request does not guarantee a spot at my preferred meeting.
- I understand that I must present concisely and remain on topic throughout the entire presentation.
- I understand that the Township of West Lincoln Council and Committee meetings are publically broadcast on the internet and that my information will become part of the Township's public record.
- I understand that personal information on this form is collected under the authority of Section 6 of the Township of West Lincoln's Procedural By-Law for the purpose of contacting individuals and/or organizations requesting an opportunity to appear as a delegation before a Committee or Council.

**Signature \***

A large, handwritten signature in black ink is centered within a white rectangular box. The signature is stylized and appears to be the name 'Mike' followed by a long horizontal stroke.

**Date \***

7/30/2024



# Thank You

Thank you for your submission. Please be advised that you will be contacted by email or by phone by a member of the Clerk's Department to confirm your appointment, provide further details and/or clarify any issues.