

CITIZEN REQUEST TO BE ON TOWN COUNCIL'S AGENDA

DATE OF REQUEST: _____

NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

CONCERN: _____

**HAS THE ABOVE MATTER BEEN DISCUSSED WITH THE APPROPRIATE DEPARTMENT HEAD?
(Please check one box below)**

Yes No If your answer is "No", your concern will be directed to the Department Head for assistance. If your answer is "Yes" and you were unsatisfied with the outcome, please explain why.

SIGNATURE: _____ DATE: _____

COUNCIL COMMENTS/ACTION:

DATE: _____