

**REQUEST TO BE ADDED TO
UTILITY COMMISSION AGENDA**

Date of Meeting: _____

Name: _____

Address: _____

Telephone: _____

Subject to be discussed at meeting: _____

Results expected from attendance: _____

Requests must be submitted at least two (2) weeks prior to date of meeting.

OFFICE USE ONLY

Town Manager:

Initials: _____ Date: _____

- Approved
- Not Approved
- Notified Applicant

Comments: _____

Clerk of Council:

Initials: _____ Date: _____

- Notified Applicant
- If applicable, added to agenda
- Filed request

Comments: _____