Person Submitting the Petition

Name:	
Address:	
Phone:	

Petition

To: the Council of the City of Kawartha Lakes, 26 Francis Street, Lindsay, ON K9V 5R8.

I/We the undersigned, petition the Council of the City of Kawartha Lakes as follows:

(Insert Petition Request Here)

#	Name	Contact Information	Signature

Signatories to a Petition are deemed to have waived any expectation of privacy as a result of the record being created for review by the general public. Questions about the collection and disclosure of personal information contained in this petition should be directed to the Office of the City Clerk at 705-324-9411 extension 1295 or 1322. All signature pages submitted must include the petition request for the signatures to be considered valid.