

The Township of Asphodel-Norwood
2357 County Road 45
P.O. Box 29
Norwood, ON
K0L 2V0

Request to Address Council

If you would like to appear as a delegation before Council for the Township of Asphodel-Norwood, you must complete this form and submit it to the Municipal Office. Please note that the deadline for delegation requests is six (6) days prior to the meeting.

Name of Individual(s): _____

Name of Organization: _____

Email: _____

Phone number: _____

Reason for delegation request: _____

Please submit the completed application to:

Kendra Sedgwick, Deputy Clerk

ksedgwick@asphodelnorwood.com

Fax: 705-639-1880

Phone: 705-639-5343 ext. 213