

# CITY OF DORRIS

P. O. Box 768  
Dorris CA 96023  
FAX: 530-397-3511

## REQUEST FOR CITY COUNCIL AGENDA ITEM

To: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Council Meeting Date: \_\_\_\_\_ Estimated Presentation Time: \_\_\_\_\_

Subject: \_\_\_\_\_: \_\_\_\_\_ Information  
\_\_\_\_\_ Discussion  
\_\_\_\_\_ Action

### APPLICANT INFORMATION

Full Name: \_\_\_\_\_ | \_\_\_\_\_  
Phone #

Address: \_\_\_\_\_

Organization (If applicable): \_\_\_\_\_

### Summary

\_\_\_\_\_  
\_\_\_\_\_

Recommended Motion (if action item): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
(SIGNATURE IS VOLUNTARY)

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Reviewed by: \_\_\_\_\_

### NOTES:

1. DEADLINE IS NOON OF THE WEDNESDAY IMMEDIATELY PRECEEDING THE COUNCIL MEETING;
2. REGULAR MEETINGS ARE THE FIRST AND THE THIRD MONDAY OF THE MONTH;
3. THIS FORM IS INTENDED TO ASSIST THE CITY CLERK IN PROPERLY POSTING AGENDA ITEMS; ANY PERSON MAY ADDRESS THE COUNCIL, EVEN WITHOUT THIS FORM, BUT NO ACTION OR DECISION MAY BE MADE BY A COUNCIL UNLES THE ITEM IS PROPERLY ON THE AGENDA;
4. PLEASE SUPPLY ANY SPECIAL INFORMATION OR DOCUMENTS REQUIRED BY THE COUNCIL TO MAKE AN INFORMED DECISION; OTHERWISE ANOTHER MEETING MAY BE REQUIRED;
5. BASIC PROTOCOL: AFTER BEING RECOGNIZED BY THE MAYOR, STATE YOUR NAME AND ADDRESS FOR THE RECORD, AND PROCEED WITH YOUR SUBJECT. THE COUNCIL WILL THEN DISCUSS YOUR ISSUE(S), AND THE MAYOR MAY RECOGNIZE OTHER MEMBERS OF THE AUDIENCE IF THEY CAN ADD TO THE PROCESS. THE COUNCIL THEN WILL TAKE ACTION.