



CITY COUNCIL MEETING AGENDA ITEM REQUEST

Requestor will be notified whether approved or denied and the council meeting date (if applicable)

Request Date _____ **Requested Meeting Date** _____

Requestor Name (please print) _____

Requestor Phone _____ **Requestor Email** _____

Recommended City Council Action:

Item Summary:

Background Information:

Special Considerations:

Requested City Council Action:

Required Signatures:

_____ **OR** _____
Mayor *Council Member #1* *Council Member #2*