## BOARD OF PUBLIC WORKS AND SAFETY Agenda Request Form

Organizations and individuals are asked to submit a request form and supporting documents to be placed on the agenda. You will be contacted by the City confirming the date of the meeting in which your request will be heard.

Please make sure that your contact information is accurate in case we need to get in touch with you. The Board of Works meets on the 1st and 3rd Monday of each month at 5:00 p.m. in City Hall located at 70 E. Monroe Street.

Date Submitted:		11/8/2013	F	Requested Meeting Date:			11/18/2013	
Confirmed Meeting Date:								
Received by: Lynnette Gray								
Contact Information: Please provide all requested information in the fields below. (Print or Type)								
On Behalf of Organization or Individual:								
Name:	Name: Lynnette Gray		ay		Telephone:		(317) 738-3365	
Title or Position:		City Attorney						
E-Mail:	lynng@jgmlawfirm.com							
Address:	63 E. Court Street, PO Box 160							
City:	Franklin		State	IN	IN ZIP:		46131	
Who will attend the meeting and present the request?								
Name:	Lynnette Gray				Telephone:		(317) 738-3365	
Title or Position:		City Attorney						
E-Mail:	lynng@jgmlawfirm.com							
Please describe the purpose or title of your presentation.								
Request approval to accept settlement proposal of Bond Safeguard Insurance Company								
Supporting documents: All supporting documents should be submitted with the request form.								
1.								
2.								
3.	3.							
4.								