



125 Trailblazer Drive | Travelers Rest, SC 29690

CITY COUNCIL MEETING CITIZEN PARTICIPATION REQUEST

| Date: |
|---|
| Name: |
| Address: |
| Phone: |
| Email: |
| |
| Matter to be discussed: |
| |
| |
| |
| Discussion the Chaite data five (E) using the |
| Discussion time limited to five (5) minutes |
| Applicant's time cannot be yielded to other individuals. |
| |
| By my signature I request the opportunity to address City Council at the next Council |
| Meeting to be held on: |
| |
| Signature: |