

Name
Monica McCarthy
Personal Pronoun
She/Her
Phone
[REDACTED]
Email
[REDACTED]
Who are you representing?
Myself
Please list the name(s) and title(s) of who will be presenting.
Monica McCarthy
Have you contacted County staff?
Yes
How will you be attending?
In-person
Date of the meeting you plan to attend.
10/29/2024
Brief Description
Monica McCarthy - opposition to the sale of Fishcarrier Road
Consent
• I (we) have read, understand and acknowledge the Rules and Procedures relating to Delegations as prescribed by the Procedure By-law. • I (we) understand and acknowledge that Council and Committee meetings at Haldimand County are audio and video recorded and live streamed online. • I (we) understand and acknowledge that the minutes of all Council and Committee meetings at Haldimand County become permanent records. • I (we) acknowledge and agree to the guidelines for being a delegation.
Disclaimer
 I (we) understand that the personal information contained on this form is collected in accordance with the Municipal Act and will be used for the purpose of responding to your delegation request. Questions about this collection may be directed to the Municipal Clerk at 905-318-5932 or clerk@haldimandcounty.on.ca .