

TOWN COUNCIL – AGENDA REQUEST FORM

THIS FORM WILL BECOME PART OF THE BACKGROUND INFORMATION USED BY THE COUNCIL AND PUBLIC

Please submit Agenda Request Form, including back up information, <u>8 days prior</u> to the requested meeting date. Public Hearing requests must be submitted <u>20 days prior</u> to requested meeting date to meet publication deadlines (exceptions may be authorized by the Town Manager, Chairman/Vice Chair).

| MEETING INFORMATION | | | | | | | |
|---|----------------|-----|-----------------|--|--------------|---------|--|
| Date Submitted: May 1, 2018 Submitted by: Planning Board Chair Robert Best Department: | | | | Date of Meeting: May 10, 2018 Time Required: 15 minutes | | | |
| Speakers: Planning Board Chair Robert Best | | | Ba | ckground Info. | Yes: _ | No: _⊠_ | |
| CATEGORY OF BUSINESS (PLEASE PLACE AN "X" IN THE APPROPRIATE BOX) | | | | | | | |
| Appointment: | | | | on/Resignation/ | [| | |
| Public Hearing: | | | Old Business: | | | | |
| New Business: | | | Consent Agenda: | | | | |
| Nonpublic: | | | Other: | | | | |
| TITLE OF ITEM | | | | | | | |
| Annual Review with the Planning Board | | | | | | | |
| DESCRIPTION OF ITEM | | | | | | | |
| Per Town of Merrimack Charter Section 6-6, at least annually, there should be an annual review with the Planning Board. This agenda item is to highlight the board's significant actions, current projects, anticipated actions, and to raise any concerns the Council should know or could act on. | | | | | | | |
| REFERENCE (IF KNOWN) | | | | | | | |
| RSA: | Warra | | Warrant A | article: | | | |
| Charter Article: | 6-6 | | Town Meeting: | | | | |
| Other: | N/A | | N/A | | | | |
| EQUIPMENT REQUIRED (PLEASE PLACE AN "X" IN THE APPROPRIATE BOX) | | | | | | | |
| Projector: | Gran | | Grant Req | Requirements: | | | |
| Easel: | | | Joint Meeting: | | | | |
| Special Seating: | ecial Seating: | | Other: | ther: | | | |
| Laptop: | o: None | | None: | | | | |
| CONTACT INFORMATION | | | | | | | |
| Name: | Robert Best | | Address | 6 Baboos | sic Lake Roa | d | |
| Phone Number | | | Email Add | lress | | | |
| APPROVAL | | | | | | | |
| Town Manager: | Yes _□_ | No: | Chair/Vice | e Chair: | Yes _⊠_ | No: | |

07/06