



# AKRON CITY COUNCIL Public Comment Request

DANIEL HARRIGAN, MAYOR

**This form must be submitted to the Council Clerk’s Office prior to the beginning of the Regular Council Meeting in order to speak at that evening’s meeting.** Your form can be

submitted via mail or personal delivery to 166 S. High Street, Akron OH 44308 (during regular business hours Monday through Friday 8:00 a.m. to 4:30 p.m.) or by email to [publiccomment@akronohio.gov](mailto:publiccomment@akronohio.gov). Any documents you wish to provide to Council during Public Comment must be submitted with this form.

At the beginning of the Public Comment Period, you will be sworn in by a member of the Law Department. **You will have 3 minutes to address Council on matters germane to Council’s authority.**

Akron City Council welcomes, values, and appreciates the varied opinions and comments from members of the public. To ensure that the meetings are respectful, peaceful, and orderly, speakers are reminded to keep their comments respectful and appropriate to Council business. No personal attacks will be permitted. The President has the authority to rule your remarks out of order and you may be removed from Chambers.

**PLEASE PRINT LEGIBLY**

NAME: \_\_\_\_\_ Date of Council Meeting: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ Ward: \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

EMAIL \_\_\_\_\_

**I wish to address City Council on a matter:** (You may attach additional pages or use the back of this form)

\_\_\_\_\_ **ON the Agenda ( Please specify)** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ **NOT on the Agenda (Please specify topic)** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**NOTICE:** *Information contained on this form becomes part of the Public Record and is, therefore, subject to public inspection.*

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

***For Office Use:***

**Forwarded to:** \_\_\_\_\_