



TOWN OF BERKLEY

MASSACHUSETTS

BOARD OF SELECTMEN

One North Main Street 02779
Office: 508-824-6794
Fax: 508-822-4603
Selectmen@BerkleyMa.us

The deadline for requests for items to be placed on the Agenda is Thursday at 2:00 pm of the week prior to the meeting. The Selectmen will determine if timely-submitted requests will be accepted based on the information supplied on this Agenda Request Form. The request may not be scheduled for the next meeting due to insufficient information or a full agenda.

AGENDA REQUEST FORM

I hereby request that my name be placed on the Agenda for the Board of Selectmen Regular Meeting

Date of Request _____ Meeting Date Requested _____

NAME _____

ADDRESS _____

TOWN/CITY _____

PHONE _____ CELL _____

E-MAIL _____

SUBJECT: please be clear and specific describing the issue(s) you wish to discuss with the Board. If you wish to refer to a Town ByLaw, specify Article and Section and how it applies to your subject. Be aware that the Board will not allow discussion about another citizen or a Town official or employee unless that person is present at the Meeting.

Signature: _____ Date _____

Office Use Only

Approved by: _____ Date: _____

Date Scheduled: _____