

## REQUEST TO ADDRESS THE BIRCH RUN VILLAGE COUNCIL

Resident:			
I,	, of	w	rish to address the
(Name)		(Address)	
Birch Run Village Council, at its			g, with regards to
	(Date)		
(reason(s)			
		Signature	Date
Organization:			
I,, (	on behalf of _		, wish
ldress the Birch Run Village Council, at its		(Date)	meeting to
request permission to (be specific as pos	ssible):	(Date)	
		Signature	Date
Office Use Only			
Insurance Policy with the Village	of Birch R	un as additional Insure	ed required:
instruice rone; with the village	or Bhon K	an ao additional insule	a roquirou.
Other information:			