CITY OF SAGINAW
CITY COUNCIL
PUBLIC INPUT REQUEST

PRINT, COMPLETE, AND SUBMIT THIS FORM

989.759.1480 Phone   989.759.1447 Fax   989.759.2199 TDD Device   clerk@saginaw-mi.com

Public Input requests shall be submitted <u>by the individual to appear</u> before City Council. Your name will be announced by the City Clerk. Come to the podium and address the Council as a whole. Your remarks will be heard by City Council, audience, news media attending, and on Saginaw Government Television (SGTV). The following rules must be followed:

1. Requests for an appearance shall be made to the City Clerk's Office no later than 1:00 p.m. on the day of the Council meeting in writing, phone, fax or email. For special meetings and meetings held at times other than 6:30 p.m., the deadline is 6 hours prior to the meeting time.
2. Each appearance is limited to **3 minutes,** timed by the City Clerk.
3. Remarks shall be related to the City of Saginaw's jurisdiction. For Special Single-Subject meetings, the speaker must limit their remarks to the single subject of the meeting.
4. Remarks and/or questions shall be addressed to the Council as a whole and not to individual Council members, City staff, or the audience. The Council will not permit personal-abusive attacks, slanderous or profane remarks. Your concern may be referred to City staff for follow-up.
5. Nothing herein is intended to limit or restrain negative, positive or neutral comment about the manner in which an individual employee, officer, official or Council member carries out their duties in public office or employment.
6. Handouts must be submitted to the City Clerk in sets of 13 prior to the meeting for distribution.

Violation of any of these rules will be considered a breach of order, for which the personal appearance will be terminated. Refusal to yield the floor will be considered a breach of peace and subject the violator to removal.

NAME_____

ADDRESS_____

CITY _____ STATE _____ ZIP _____

EMAIL_____

PHONE_____ JURISDICTION_____

DATE FOR PUBLIC INPUT _____

CITY TOPIC_____

_____

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SIGN_____DATE_____

CITY CLERK'S OFFICE USE ONLY

Handouts_____ MUST PROVIDE 13 SETS

Date Received_____ Received By_____

Dept Notified_____