

Office Only

Date: _____ Time: _____ Initials: _____



Valparaiso Lakes Area Conservancy District

1805 BURLINGTON BEACH ROAD

VALPARAISO, INDIANA 46383

PHONE (219) 464-3770

Public Participation Request Form

This does not guarantee public participation pursuant to IC-5-14-1.5-3.3. Some questions or concerns may require time to research and provide an informed response.

PLEASE PRINT CLEARLY

Date: _____

Board Meeting Date: _____

Name: _____

Address: _____

Phone: _____

Subject: _____

Question/Concern (Please be specific):

Request for public participation forms must be received in office and stamped with the time and date of arrival. No electronic requests for public records will be accepted.

☐

I have been given and understand the Public Participation Guidelines

Signature