SALEM CITY

30 West 100 South Salem, Utah 84653 801-423-2770, Fax 801-423-2818, www.salemcity.org

APPLICATION INFORMATION



APPLICATION TO APPEAR BEFORE THE CITY COUNCIL

| Name of Applicant or Authorized Agent(s): | | | |
|---|--------|------|--------|
| Address: | | | |
| City: | State: | Zip: | Phone: |
| Fax: E-mail: | | | |
| Signature of Applicant: | | | |
| Date of Council Meeting you wish to appear: | | | |
| Date: | | | |
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| A DETAILED SUMMARY FOR APPEARING BEFORE THE COUNCIL | | | |
| Be as specific as possible, with as much detail as possible. Submit any documents, maps, etc. | | | |
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*This application needs to be submitted 1 week prior to the scheduled Council Meeting that you wish to attend. Council Meetings are on the 1st & 3rd Wednesday of each month, except December.