

Municipality of Chatham-Kent Commemorative Naming Policy Appendix A Naming Application Form

Nominator's Information Name: ____ Mailing Address: Telephone: _____ **Information Concerning the Proposed Name** Which Municipal property or facility are you submitting this name for: _______ Proposed Name: _____ If the name suggested relates to the commemoration of an individual who is alive, please provide the individual's contact information in the section below. Note: A Commemorative Name may be used only once in the Municipality of Chatham-Kent – subsequent requests will be denied. Name of Nominee: Mailing Address: ____ Applicable Criteria (select all that apply) ☐ The nominated names give a sense of place, continuity, belonging and/or celebrates the uniqueness and distinguishing characteristics of Chatham-Kent ☐ The nominated name maintains a long standing local area identification with residents of Chatham-Kent



	The nominated name promotes pride in the Municipality of Chatham-Kent, acknowledges local heritage, history and/or recognizes the unique features and geography		
	The nominated name recognizes the contributions or organizations such as a partnership with or without financial contribution		
	The nominated individual/family had demonstrated excellence, courage or exceptional service to the citizens of the Municipality of Chatham-Kent, the Province of Ontario and/or Canada		
	The nominated individual/family has an extraordinary community service record		
	The nominated individual/family has worked to foster equality and reduce discrimination		
	A direct relationship or association existed between the place of residence of or community efforts undertaken by the individual/family and the property/building or element to be named.		
	The nominated individual has made a significant financial contribution to a park or facility, and the contribution significantly benefits the community that the park or facility serves		
	The nominated name has historical significance		
Ratio Please	nale e describe the rationale for Nomination.		



Additional Information Required

Please attach the following information as required under Section 3 of the Commemorative Naming Policy:

- organization or an individual) demonstrating that the proposed name is of significance to the community and/or the municipality;
- Documentation including letters from organizations and individuals providing substantial support for the request;
- Documentation verifying that the person/organization being honoured is in agreement with the naming proposal (if they are living), or by their legal representative should they be deceased.

Consent

	I have submitted all information accurate	ely and completely to the best of my knowledge	
	•	ality of Chatham-Kent Commemorative Naming	
	Policy		
	Understand the Municipality is under no obligation to accept my proposed name, and proposal may be declined by the Municipality at any time and for any reason during th review		
	I understand that Municipal staff may co proposal for further information as need	ntact me at any time during their review of this ed	
Nomin	ator's Name (please print)	-	
Nomin	ator's Signature	Date	

The information collected on this form will be used as part of the Commemorative Naming Process. Personal information on the form and information collected as a result of the public consultation process and staff investigation will be used by Municipal staff and may be made available to the internal stakeholders as outlined in the Commemorative Naming Policy.