



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

Nominator's Information

Name: _____

Mailing Address: _____

Telephone: _____

E-mail: _____

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: _____

Telephone: _____

E-mail: _____

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



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 accurately and completely to the best of my knowledge
- I have read and understand the Municipality of Chatham-Kent Commemorative Naming Policy
- Understand the Municipality is under no obligation to accept my proposed name, and my proposal may be declined by the Municipality at any time and for any reason during the review
- I understand that Municipal staff may contact me at any time during their review of this proposal for further information as needed

Nominator's Name (please print)

Nominator'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.