



Township of Hamilton  
Water Supply Master Plan



## COMMENT FORM

Name (please print):  Date:

Do you wish to receive updates in regards to this project? ☐ Yes ☐ No

**Contact Information (Optional)**

Agency (if applicable):

Address (number, street and apt. no.):

City, Province, Postal Code:

Phone:  Email:

Please provide any comments or questions you have regarding this Master Plan.

Please place any additional comments on the reverse of the form. Completed forms can be returned to any of the presenters or can be mailed or emailed to the individuals below.

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Comments and information regarding this Study are being collected to assist the Ministry in meeting the requirements of the EA Act. This material will be maintained on file for use during the Study and may be included in project documentation. With the exception of personal information, all comments will become part of the public record.