



# UAC Work Plan Request Form

**Date:** \_\_\_\_\_ **UAC Member Name:** \_\_\_\_\_

**Title of Request:** \_\_\_\_\_

**Brief Description of Request:**

**UAC's Role or Deliverable:**

- ☐ UAC Recommendation to Council  
☐ Briefing/Update

**Utility:**

- ☐ Drinking Water   ☐ Wastewater   ☐ Storm and Surface Water   ☐ Waste ReSources

**Amount of time on UAC agenda (30, 60, 90 minutes etc):** \_\_\_\_\_

**Budget Implications?** ☐ Yes   ☐ No   ☐ Don't know