



CORPORATION OF THE TOWNSHIP OF HORTON  
Schedule "B"  
Request for Action  
FORM

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Information Received by: \_\_\_\_\_

Signature of Township Employee receiving request(s): \_\_\_\_\_

Requestees Name: \_\_\_\_\_ Requestees Signature: \_\_\_\_\_  
(If in person)

Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Email: \_\_\_\_\_

Description/Type of Request(s) for Action:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Geographic Location of Request(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OFFICE USE ONLY**

Department/Individual Referred to: \_\_\_\_\_  
(Forward a copy of this report to the CAO/Clerk)

Action Taken:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of action: \_\_\_\_\_ Supervisors Signature: \_\_\_\_\_

Resolution: Yes  # \_\_\_\_\_ No

CAO:  follow up not required  response letter sent  pending investigation /insurance

**After request is addressed, place original in Front Office- Request(s) for Action binder**