## **PRIOR NOTIFICATION FORM**

## NOTICE OF MATTER TO BE SUBMITTED TO THE BOARD OF ALDERMEN

ТО	(list app	olicable aldermen/v	vomen):	Full Board	of Alders	
DA'	TE:	October 18, 202	0			
FRO	OM:	Department	LCI			
		Person	Arlevia	Samuel	Telephone	946-8436
		nform you that the f f Aldermen.	following ma	tter affecting y	our ward(s) will be	submitted to
	THE CON	CITY OF NEW H	IAVEN ANI EAL PROP	D CONNCOR ERTY KNOW	AGREEMENT BE P, LLC FOR THE YN AS PORTIONS ICUT	E
	eck one i	if this an appointme rat	ent to a comi	mission		
	Republi	ican				
	Unaffili	iated/Independent/0	Other			
		INSTE	RUCTIONS	TO DEPART	MENTS	
1.	Departments are responsible for sending this form to the alderperson(s) affected by the item.					
2.	This form must be sent (or delivered) directly to the alderperson(s) <b>before</b> it is submitted to the Legislative Services Office for the Board of Aldermen agenda.					
3.	The date entry must be completed with the date this form was sent the alderperson(s).					
4.	Copies to: alderperson(s); sponsoring department; attached to submission to Board of Aldermen.					