

Office of the Selectmen  
**TOWN OF GREENVILLE NH**  
P.O. Box 343  
Greenville, NH 03048-0343  
Phone: (603) 878-2084

**Request to meet with Board of Selectmen**

Name Person(s) making request: \_\_\_\_\_

Address of requesting party: \_\_\_\_\_

Phone Number: (home) \_\_\_\_\_ (work or cell) \_\_\_\_\_

Issue(s) you would like to discuss with the Board: \_\_\_\_\_

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

(please attach copies of any documentation the Board should review)

The Board normally meets the 2<sup>nd</sup> and 4<sup>th</sup> Wednesdays of each month starting at 6:00 p.m. Do you have a request for a time: earlier or later in the agenda? \_\_\_\_\_

Statement of remedy (what would you like us to do?) \_\_\_\_\_

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Person Receiving Request

\_\_\_\_\_  
Date & Time Received

**FOR OFFICE USE ONLY**

Date notified BOS Chair: \_\_\_\_\_

Date & Time placed on Agenda: \_\_\_\_\_

Date Requester notified: \_\_\_\_\_