City of Venice Request to Speak (print legibly)
Name: City of Venice Request to Speak (print legibly) Name: 454 822 4617 Date: 7/5/22
Address: 10117 Princess Pilm Av #550 City: TampA Zip 33610
If you are speaking on your own behalf, are you a City Resident □Yes □No, City Property Owner ¶Yes □No or City Business Owner □Yes □No
Are you speaking on behalf of someone? (You must have a written authorization from that person or entity if not their attorney) \Box Yes \Box No
If so who: Address Are they a City Resident Yes No, City Property Owner Yes No or City Business Owner Yes No
Please Check One
□ Audience Participation – Topic: □ During Agenda Item - Topic: 22 - 20 C U ↓ 22 - 19 S P
During Agenda Item - Topic: 22 - 20 CU 1 22 - 79 SP
If you are going to present evidence and/or testimony during a public hearing, you are required to complete and sign the following oath. You are not required to sign the oath if you are speaking at Audience Participation or at a workshop.
I swear or affirm, under penalty of perjury, that the evidence or factual representation, which I am about to give or present at the public hearing, held this day of 20 is truthful.
Signature: Q Z
Comments at public hearings and during audience participation are limited to five minutes per speaker for city residents, property owners and business owners, and two minutes for all others, unless otherwise noted.