



"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name:

JEFFERY A. BOONE

Date:

11/27/18

Address:

City:

State:

Zip:

City Resident: ☐ Yes ☐ No

Telephone No:

Organization (if any):

Please Check One

☐ Audience Participation – Topic:

☐ During Agenda Item - Topic:

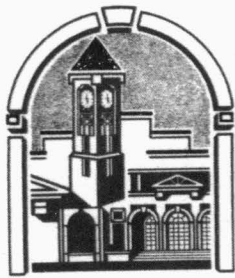
MURPHY OATH

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 27 day of NOV 20 18 is truthful.

Signature:

Comments at public hearing and during audience participation are limited to five minutes per speaker unless otherwise noted.



"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name:

Dick Lombro

Date:

4/27/18

Address:

295 Marsh Creek Rd

City:

Venice

State:

FL

Zip:

34292

City Resident:

☒ Yes ☐ No

Telephone No:

9414851269

Organization (if any):

CVC

Please Check One

☐ Audience Participation – Topic:

☒ During Agenda Item - Topic:

Murphy Oaks

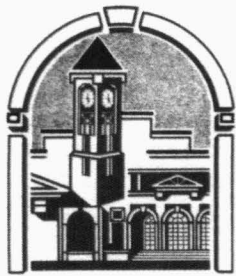
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Signature:

[Signature]

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: GREGG SINGLETON Date: 11-27-18

Address: 10225 FOUNTAIN CT

City: NEW PORT RICHEY State: FL Zip: 34654

City Resident: ☐ Yes ☒ No

Telephone No: 813 433 1150

Organization (if any): Singleton Engineering

Please Check One

☐ Audience Participation – Topic: _____

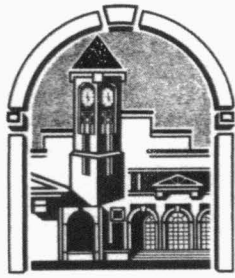
☒ During Agenda Item - Topic: MURPHY DAKS

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Signature: [Signature]

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City of Venice

Request to Speak (print legibly)

Name: ROGER CLARK Date: _____

Address: _____

City: _____ State _____ Zip _____

City Resident: ☐ Yes ☐ No Telephone No: _____

Organization (if any): CITY OF VENICE

Please Check One

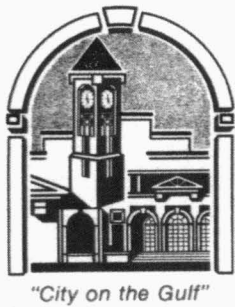
- ☐ Audience Participation – Topic: 17-16RC
☐ During Agenda Item - Topic: _____

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 27 day of NOV. 2018 is truthful.

Signature: Roger Clark

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City of Venice

Request to Speak (print legibly)

Name: Jeff Wright Date: 11/27/18
Address: 8889 Pelican Bay Blvd #400
City: Naples State FL Zip 34108
City Resident: ☐ Yes ☒ No* Telephone No: _____
Organization (if any): Henderson Franklin

*representing property owner/applicant

Please Check One

☐ Audience Participation – Topic: _____

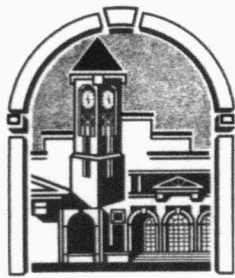
☒ During Agenda Item - Topic: Murphy Oaks PWD

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.

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Signature: [Signature]

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City of Venice

Request to Speak (print legibly)

Name: Herb Lawson Date: 11-27-18
Address: 36400 Woodward
City: Bloomfield Hills State MI Zip 48301
City Resident: ☐ Yes ☒ No Telephone No: 248-290-5300
Organization (if any): Winthron Development Inc

Please Check One

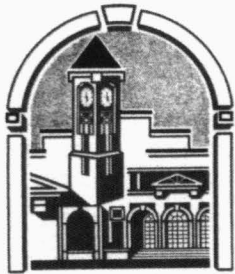
☐ Audience Participation – Topic: _____
☒ During Agenda Item - Topic: Murphy Oaks

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: Herbert Lawson

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: Clint Cuffe Date: 11/27/18
Address: 7978 Cooper Creek Blvd, Ste 102
City: University Park State: FL Zip: 34201
City Resident: ☐ Yes ☒ No Telephone No: 813 362-5088
Organization (if any): WRB Engineering

Please Check One

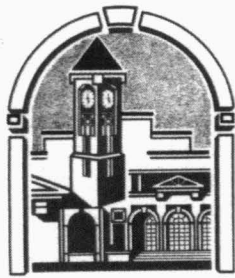
- ☐ Audience Participation – Topic: _____
☒ During Agenda Item - Topic: MURPHY OASIS

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 27th day of November 2018 is truthful.

Signature: _____

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: Kimberly Farrell Date: 11/27/18

Address: PO Box 400

City: Venice State: FL Zip: 34284

City Resident: ☐ Yes ☐ No

Telephone No: 941-809-6365

Organization (if any): Fox hea Farm, Inc.

Please Check One

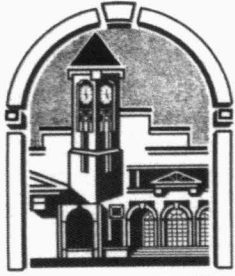
☐ Audience Participation – Topic: _____
☒ During Agenda Item - Topic: Morphing Oaks

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 27 day of Nov 20 18 is truthful.

Signature: Kimberly Farrell

Comments at public hearing and during audience participation are limited to five minutes per speaker unless otherwise noted.



City of Venice

Request to Speak (print legibly)

Name: Laurie Birnbach Date: 11/27/18

Address: PO Box 400

City: Venice State FL Zip 34284

City Resident: ☐ Yes ☒ No Telephone No: 941-320-2018

Organization (if any): Fox Lea Farm

Please Check One

☐ Audience Participation – Topic: _____

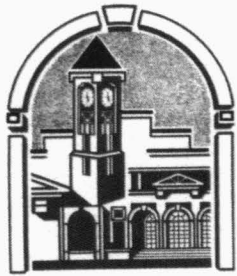
☒ During Agenda Item - Topic: Murphy Oats

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Signature: [Signature]

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

m

Name: JACK WORRELL Date: 11/27/2018
Address: 762, SGRET WALK LANE
City: VENICE State FL Zip 34292
City Resident: ☒ Yes ☐ No Telephone No: (941) 480-9578
Organization (if any): _____

Please Check One

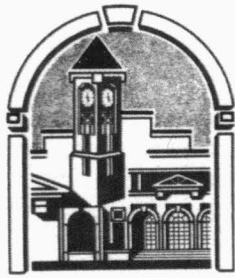
- ☐ Audience Participation - Topic: MURPHY OAKS
☐ During Agenda Item - Topic: _____

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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 27 day of NOV 2018 is truthful.

Signature: B. J. Worrell

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: Henry von der Linde Date: 11/27/18

Address: 740 Sawgrass Bridge Road

City: Venice State FL Zip 34292

City Resident: ☒ Yes ☐ No

Telephone No: 941-882-8970

Organization (if any): _____

Please Check One

☐ Audience Participation – Topic: _____

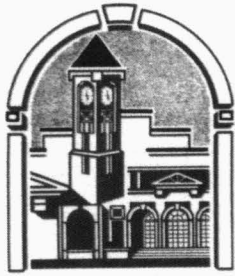
☒ During Agenda Item - Topic: Murphy Oaks

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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 27 day of Nov 20 18 is truthful.

Signature: Henry von der Linde

Comments at public hearing and during audience participation are limited to five minutes per speaker unless otherwise noted.



"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: Lynette Edmonds Date: 11/27/18

Address: 476 Arborview Lane

City: Venice State FL Zip 34292

City Resident: ☒ Yes ☐ No Telephone No: 703 273-4888

Organization (if any): _____

Please Check One

☒ Audience Participation – Topic: Murphy Oaks

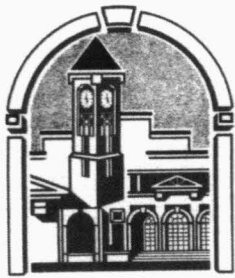
☐ During Agenda Item - Topic: _____

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Signature: Lynette Edmonds

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: Greg Prill Date: 11/27/18
Address: 737 Misty Pine Dr.
City: Venice State: FL Zip: 34202
City Resident: ☒ Yes ☐ No Telephone No: 941-800-5155
Organization (if any): Sawgrass

Please Check One

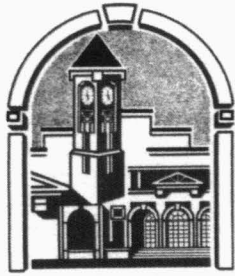
- ☐ Audience Participation – Topic: _____
☐ During Agenda Item - Topic: Murphy Oaks Zoning

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Signature: Greg Prill

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: Joyce Lyons Date: 11/27/18
Address: 521 MARSH CREEK RD.
City: Venice State FL Zip 34292
City Resident: ☒ Yes ☐ No Telephone No: 941-480-9588
Organization (if any): _____

Please Check One

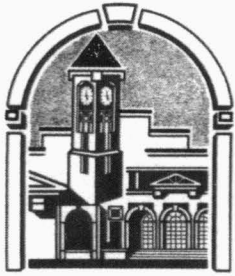
- ☐ Audience Participation – Topic: _____
☒ During Agenda Item - Topic: MURPHY OAKS

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Signature: Joyce Lyons

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: Pam Schierberg Date: 11/27/18

Address: 1624 Lis court Dr.

City: Venice State: FL Zip: 34292

City Resident: ☒ Yes ☐ No

Telephone No: 941 485 0405

Organization (if any): WATERFORD MASTER OWNERS ASSN.

Please Check One

☒ Audience Participation – Topic: Murphy Oaks

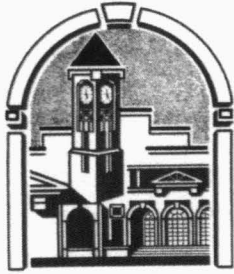
☐ During Agenda Item - Topic: _____

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Signature: Pam Schierberg

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: ROBERT ZIRINGER Date: 11-27-18

Address: 558 SAWGRASS BRIDGE RD

City: VENICE State: FL Zip: 34292

City Resident: ☒ Yes ☐ No Telephone No: 412 996 1539

Organization (if any): _____

Please Check One

☒ Audience Participation – Topic: MURPHY OAKS

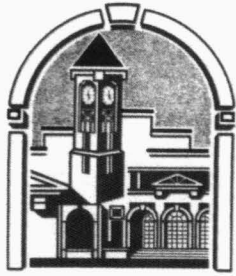
☐ During Agenda Item - Topic: _____

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Signature: [Signature]

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: JOHN PUTNOKY Date: 11/27/18
Address: 350 MARSH LANDING WAY
City: Venice State FL Zip 34292
City Resident: ☒ Yes ☐ No Telephone No: 941 882 3970
Organization (if any): _____

Please Check One

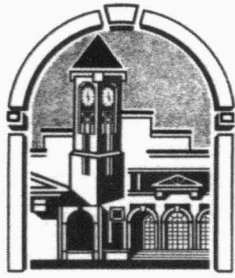
- ☐ Audience Participation – Topic: _____
☒ During Agenda Item - Topic: MURPHY DAKS

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Signature: _____

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City of Venice

Request to Speak (print legibly)

Name: JAMES LAWSON Date: 11/27/18

Address: 335 TURTLEBACK CROSSING

City: VENICE State FL Zip 34292

City Resident: ☒ Yes ☐ No Telephone No: 941-484-6239

Organization (if any): _____

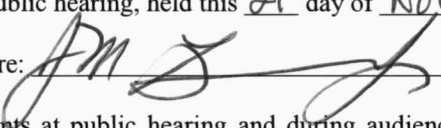
Please Check One

☒ Audience Participation – Topic: MURPHY OAKS

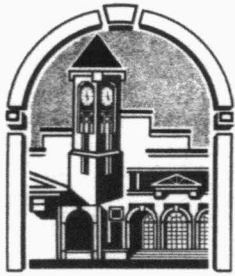
☐ During Agenda Item - Topic: _____

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Signature: 

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

Name: JONATHAN ROMINA Date: 11.27.18

Address: 2401 FIRST ST, SUITE 201

City: FORT MYERS State FL Zip 33901

City Resident: ☐ Yes ☒ No

Telephone No: 239 226 0024

Organization (if any): EN SITE, INC.

Please Check One

☐ Audience Participation – Topic: _____

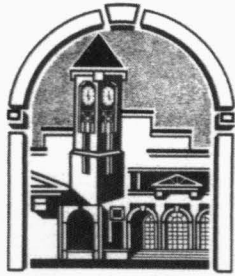
☒ During Agenda Item - Topic: MURPHY OAKS

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Signature: [Signature]

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

declined

Name: Paul McCulloch Date: 11/27/2018

Address: 476 Arborview Lane

City: Venice State: FL Zip: 34292

City Resident: ☒ Yes ☐ No Telephone No: 203 321 9722

Organization (if any): _____

Please Check One

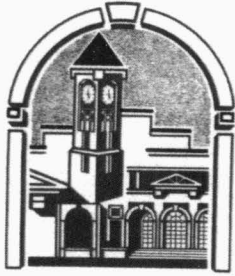
☒ Audience Participation – Topic: Murphy Oaks
☐ During Agenda Item - Topic: _____

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Signature: _____

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"City on the Gulf"

City of Venice

Request to Speak (print legibly)

declined

Name: Barbara Hutton Date: 11/27/18

Address: 741 Misty Pine

City: Venice State: FL Zip: 34292

City Resident: ☒ Yes ☐ No

Telephone No: 941 412-3141

Organization (if any): _____

Please Check One

- ☐ Audience Participation – Topic: Murphy Oaks
☐ During Agenda Item - Topic: _____

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Signature: Barbara Hutton

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