## Public Hearing Oath

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 today is truthful.

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Brittany Smith

12/17/2024 at 10:47am

| Drittere Creith   |  |   |
|---|--|---|
| Brittany Smith<br>(941) 882-7431<br>bsmith@venicefl.gov | Check-in:  | 12/17/2024 at 10:47am                             |
|   | Button Used:   | Planning Commission                               |
|   | Check-out:   | 12/17/2024 at 11:59pm                             |
|   | QR Code:   | View  |
|   | Public Hearing Oath:   | DØ  |
|   | What is your address?  | 401 W Venice Ave, Venice, FL 34285                |
|   | Are you a City Resident/ Property<br>Owner, Business Owner, or Non-<br>Resident?   | Staff Member                                      |
|   | Are you speaking for Public Comment<br>or presenting as an Applicant or<br>Agent?  | City Staff  |
|   | What topic are you speaking on?  | 24-57VZ 520 Venezia Parkway Pool<br>Cage Variance |
|   | If speaking on topic not on agenda or<br>on multiple topics, list topic(s) below.  | n/a   |
|   | I understand that this agency is a<br>public entity and is subject to<br>Chapter 119, Florida Statutes,<br>concerning public records, and<br>documents may be disclosed to the<br>public and media upon request. If I<br>qualify for an exemption, it is my<br>responsibility to notify the Clerk's<br>office. | Yes   |

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 today is truthful.



Jeffery A. Boone (941) 488-6716 jboone@boone-law.com

SIGNATURE

Jeffery A. Boone

12/17/2024 at 1:18pm

DATE

NAME

| Check-in:  | 12/17/2024 at 1:18pm                              |
|--|---|
| Button Used:   | Planning Commission                               |
| Check-In Location Name:  | Chambers Mobile                                   |
| Check-out:   | 12/17/2024 at 11:59pm                             |
| QR Code:   | View  |
| Public Hearing Oath:   | DØ  |
| What is your address?  | PO Box 1596 Venice                                |
| Are you a City Resident/ Property<br>Owner, Business Owner, or Non-<br>Resident?   | City Resident / Property Owner                    |
| Are you speaking for Public Comment<br>or presenting as an Applicant or<br>Agent?  | Applicant or Contractor for applicant             |
| What topic are you speaking on?  | 24-57VZ 520 Venezia Parkway Pool<br>Cage Variance |
| If speaking on topic not on agenda or<br>on multiple topics, list topic(s) below.  | n   |
| I understand that this agency is a<br>public entity and is subject to<br>Chapter 119, Florida Statutes,<br>concerning public records, and<br>documents may be disclosed to the<br>public and media upon request. If I<br>qualify for an exemption, it is my<br>responsibility to notify the Clerk's<br>office. | Yes   |