City of Venice Request to Speak (print legibly)



Name:	1	1	A	N	-	T	R	A	7	17	E	L	1	Date:	4-1	2 -	- 20	2	2

Address: 418 GULF ST

ENICE State FL Zip 34285

City Resident: ZYes □No City Property Owner: ZYes □No

City Business Owner: \(\textstyre{\textsty}

Organization (if any): VENICE HPB + Please Check One ☐ Audience Participation – Topic: □ 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 ____ day of ____ 20___ is truthful.

Signature: _

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.