

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.





SIGNATURE

Marty Black

NAME

09/23/2025 at 8:28am

DATE

Marty Black (941) 915-3435 martyblack@outlook.com	Check-in: 09/23/2025 at 8:28am
	Button Used: City Council
	Check-In Location Name: Council Chambers
	Check-out: 09/23/2025 at 10:19am
	QR Code: View
	Public Hearing Oath:  
	I understand that this agency is a public entity and is subject to Chapter 119, Florida Statutes, concerning public records, and documents may be disclosed to the public and media upon request. If I qualify for an exemption, it is my responsibility to notify the Clerk's office. Yes
	What is your address? 602 84th st nw
	Are you a City Resident/ Property Owner, Business Owner, Non-Resident or Agent? Non- Resident/ Not a Property Owner
	Are you speaking for Public Comment or presenting as an Applicant or Agent? Agent/ Attorney
	What topic are you speaking on? PH- CC25-43HE Height Exception Surgery Center
	If wanting to speak on multiple items, please list additional topics below or enter N/A. na
	Do you want to speak during the Agenda Item or during Audience Participation? (If the topic you've chosen is the subject of a public hearing, the Clerk will call your name during the agenda item.) During the Agenda Item (Required for Public Hearings)

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SIGNATURE

Sydney

NAME

09/23/2025 at 9:21am

DATE

Sydney (813) 409-6986 sathornton@vhb.com	Check-in: 09/23/2025 at 9:21am
	Button Used: City Council
	Check-In Location Name: Council Chambers
	Check-out: 09/23/2025 at 10:19am
	QR Code: View
	Public Hearing Oath:  
	I understand that this agency is a public entity and is subject to Chapter 119, Florida Statutes, concerning public records, and documents may be disclosed to the public and media upon request. If I qualify for an exemption, it is my responsibility to notify the Clerk's office. Yes
	What is your address? 6304 N 13th Street Tampa, FL
	Are you a City Resident/ Property Owner, Business Owner, Non-Resident or Agent? Witness or Contractor for Applicant
	Are you speaking for Public Comment or presenting as an Applicant or Agent? Applicant or Contractor for Applicant
	What topic are you speaking on? PH- CC25-43HE Height Exception Surgery Center
	If wanting to speak on multiple items, please list additional topics below or enter N/A. n/a
	Do you want to speak during the Agenda item or during Audience Participation? (If the topic you've chosen is the subject of a public hearing, the Clerk will call your name during the agenda item.) During the Agenda Item (Required for Public Hearings)

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SIGNATURE

Nicole Tremblay

NAME

09/23/2025 at 9:41 am

DATE

Nicole Tremblay (941) 882-7449 ntremblay@venicefl.gov	Check-in: 09/23/2025 at 9:41am
	Button Used: City Council
	Check-In Location Name: Council Chambers
	Check-out: 09/23/2025 at 10:19am
	QR Code: View
	Public Hearing Oath: <input type="checkbox"/> <input checked="" type="checkbox"/>
	I understand that this agency is a public entity and is subject to Chapter 119, Florida Statutes, concerning public records, and documents may be disclosed to the public and media upon request. If I qualify for an exemption, it is my responsibility to notify the Clerk's office. Yes
	What is your address? 401 W Venice Ave
	Are you a City Resident/ Property Owner, Business Owner, Non-Resident or Agent? N/A City Staff
	Are you speaking for Public Comment or presenting as an Applicant or Agent? City Staff
	What topic are you speaking on? PH- CC25-43HE Height Exception Surgery Center
	If wanting to speak on multiple items, please list additional topics below or enter N/A. n/a
	Do you want to speak during the Agenda item or during Audience Participation? (If the topic you've chosen is the subject of a public hearing, the Clerk will call your name during the agenda item.) During the Agenda Item (Required for Public Hearings)