City of Venice
Request to Speak (print legibly)

Name: Robert Farrell
Date: 4/12/2022

Address: 640 West Venice Ave

City: Venice State FL Zip 34285

City Resident: Yes No City Property Owner: Wes No City Business Owner: Yes No Telephone No: 941-468-3681

Organization (if any):

Please Check One
Addience Participation - Topic:
During Agenda Item - Topic: 0 RD, No. 2022-99

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 /2 day of April 2027 is truthful.

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.

Signature: