Designated Speaker Form

Individuals on the written list do cede their three minutes of public comment.

This form must be printed and filled out by hand.

Application(s) _____ Hearings: PVZAB_____ PZA _____ BCC_____

In Support of ___ In Opposition to ___ Designated Speaker Name: _____

	Printed Name	Signature	Address
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Documents and visual aids for presentation must be submitted by the assigned timeline for the indicated hearings.