**CITY OF \_\_\_\_\_\_\_\_\_\_\_\_\_**

PUBLIC HEARING

SIGN-UP SHEET

**You must sign up to testify – or submit comments**

Agenda Item Number (or name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: September 15, 2014

**PLEASE PRINT LEGIBLY**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physical Address (not post office box)(city of residence):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Choose one:**

\_\_\_\_ Support the application \_\_\_\_ Neutral \_\_\_ Oppose the application

Do you wish to testify? \_\_\_ Yes \_\_\_ No

If you do **not** wish to testify orally, your comments on this sheet will be read into the record – so long as they are written legibly, signed below and do not exceed the space allotted.

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 Written signature (only if not testifying)