Correspondence Between
Staff and Applicant
Approval Letter

r



PJUS "'DSPINI



Request to Speak cards must be submitted to City Staff <u>ELEFORE</u> public testimony begins.

Public testimony is limited to three (5) minutes per speaker.

Additional time MAY be granted to speakers representing two or more persons.

Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (print) FR. DBUG LORIG MEETING DATE 25 MAY 2011
NAME OF CROUP/ORGANIZATION (Fapplicable)
ADDRESSZIP
HOME PHONE 480-934-149 GWORK PHONE SAMPC
E-MAIL ADDRESS (optional)
I WISH TO SPEAK ON AGENDA ITEM # I WISH TO DONATE MY TIME TO
MI WISH TO SPEAK DURING PUBLIC COMMENT ² CONCERNING Wash MONGUMA dury MANA
Cilizans may complete one Request to Speak "Public Comment" card per meeting and submit it to City Steff. "Public Comment" time is reserved for cilizen comments regarding non-agendized items. The Board and Commission may bear "Public Comment" testimony, but is prohibited by state law from discussing items which are not listed on the agenda.

This card constitutes a public record under Arizona law.

HOW TO ADDRESS THE BOARD AND COMMISSION

The Chair will call your name when it is your turn to speak

Approach the podium and state your name and address for the record

Groups wishing to speak are encouraged to select a spokesperson to represent the views of the group

Public testimony is limited to three minutes per speaker. (At the Chair's discretion, speakers representing two or more persons may be granted additional time.)

A timer light located at the podium will help you to time your comments

A green light indicates the timer has been activated

A yellow light indicates there is one minute remaining

A red light indicates the comment period has ended



FJES" OSPENI



Request to Speak cards must be submitted to City Staff <u>SEFORE</u> public testimony begins.

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Gends for designated speakers and the person(s) they represent must be submitted together.

MAME (partial) Living Hage	MEETING DATE 5° ZS-W
NAME OF GROUP/ORGANIZATION (Mapplicable)	
address 1755 E Saland De	zip 25250
HOME PHONE 480 991-2192	
E-MAIL ADDRESS (optional)	
DIWISH TO SPEAK ON ACENDA ITEM #	M I WISH TO DONATE MY TIME TO <u>MANAMA SPANCE</u>
I WISH TO SPEAK DURING PUBLIC COMMENT	
Citizens may complete one Request to Speak "Public Com reserved for ettizen comments recording non-agendized ite	ment" card per meeting and submit it to City Staff. "Public Comment" time is us. The Board and Commission may hear "Public Comment" textinous, but is

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MAME (mini) More Ture	MEETING DATE <u>5/25/</u> 00
NAME OF GROUP/ORGANIZATION (Familicable) 51. MG	via boresto
ADDRESS BZ48 E. Lippizan TVI.	
HOME PHONE 400-405-2655 WORKPH	
E-MAIL ADDRESS (optional) White @ brephorenist	
DIWISH TO SPEAK ON AGENDA ITEM # TO	
DIWISH TO SPEAK DURING PUBLIC COMMENT CONCERNI	y

Contrary may complete one Request to Speak "Public Comment" and per meeting and submit it to City Staff. "Public Comment" time is reserved for edition comments regarding non-agendized tiems. The Board and Commission may bear "Public Comment" testimony, but is prohibited by state law from discussing tiems which are not listed on the agenda.

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- Approach the podium and state your name and address for the record.
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- Public testimony is limited to three minutes per speaker. (At the Cheir's discretion, speakers representing two or more persons may be granted additional time.)
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REQ | ST O SPEAK

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NAME (print) MOLLY Kaller	MEETING DATE 5/25	5/2011
V		,
NAME OF GROUP/ORGANIZATION (if applicable)		-
ADDRESS 8212 E Devonshire	Ave	ZIP_85251
HOME PHONE	WORK PHONE	
E MAIL ADDRESS (optional)		
☐ I WISH TO SPEAK ON AGENDA ITEM#	LWISH TO DONATE MY TIME TO _	
☐ I WISH TO SPEAK DURING PUBLIC COMMENT *	CONCERNING	

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NAME OF GROUP/ORGANIZATION (Fapplicable) NOIGH BOOK FROOD
ADDRESS 9508 E. M. PONGLO DZ · SETIEDALZ JAZ IP 88256
HOME PHONE 480-481-6446 WORK PHONE
E-MAIL ADDRESS (optional)
OT SMIT YM STAKOO OT HRIW IT TO BOKEDA KO XASERS OT HRIW IN
WI WISH TO SPEAK DURING PUBLIC COMMENT [®] CONCERNING <u>HOLOGIC TOWN OF DESPERCE</u>
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MAME (print) KARRA PET BE D MEETING DATE 5/25/2011
NAME OF GROUP/ORGANIZATION (Mapplicable)
IN 27 1 CAM CAM CAM STORY
HOME PHONE WORK PHONE 602-291-2185
E-MAIJADORESS (Optional) KPCT (COCCO) (OVCT
D/I WISH TO SPEAK ON AGENDA ITEM # DONATE MY TIME TO
ONSH TO SPEAK DURING FUBLIC COMMENT [©] CONGERNING
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NAME (DAM) AMUS KALLUS MEETING DATE 5/25/2011
NAME OF GROUP/ORGANIZATION (If applicable)
NODRESS BUZ & DENONSLIVE AVE ZIP 5557
HOME PHONE (430) 993-3177 WORK PHONE
E-MAIL ADDRESS (optional)
I WISH TO SPEAK ON AGENDA ITEM () WISH TO DONATE MY TIME TO
DIWISH TO SPEAK DURING PUBLIC COMMENT ^C CONCERNING
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NAME (print) 15 d (2) CMEY MEETING DATES JS (1)
NAME OF GROUP/ORGANIZATION (If applicable) Resident in area of applicable
ADDRESS 8450 E. STOLLA SCOTTS daly AS VI ZIP 85250
HOME PHONE 480-948, 1965 WORK PHONE 480-287-2336
E MAIL ADDRESS (optional) (LOCAMOR) OF 6 @ OCL, COM
I WISH TO SPEAK ON AGENDA ITEM # WISH TO DONATE MY TIME TO
ALMISH TO SEEM ON AGENDATION:# DIVISH TO DONATE WIT TIME TO
☐ I WISH TO SPEAK DURING PUBLIC COMMENT"* CONCERNING

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Request to Speak cerds must be submitted to City Stati <u>ELECKE</u> public testimony begins.

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Additional time MAY be granted to speakers representing two or more parsons.

Cerds for designated speakers and the parson(s) they represent must be submitted together.

NAME (polici)	e la vel	Fairbanks	M D Maeting Date_	\$-75-1	1
NAME OF GROUP/O	R C ANIZATION (Japliedia)	RE DOWN	Free only	
ADDRESS	8 GQ }	E. Viñedo	Lane	CMP SIP .	85784
HOME PHONE	480: 8	<u> 20. 374/</u> work	PHONE		<u>e</u>
E-MAIL ADDRESS (6	ptional) (RCOSINCIA	MSN. COR	A	
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PEQUEST TO SPEAK + 1 (c.f.d

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NAME (print) MARIL REIBERT MEETING DATE 25	MA) 2011
NAME OF GROUP/ORGANIZATION (if applicable)	
ADDRESS 8313 B VALLEY VIEW ROAD	ZIP 85250
HOME PHONE 480 947 3516 WORK PHONE	
E MAIL ADDRESS (optional)	
\square I WISH TO SPEAK ON AGENDA ITEM # $\underline{9}$ \square I WISH TO DONATE MY TIME TO $\underline{}$	
☐ I WISH TO SPEAK DURING PUBLIC COMMENT** CONCERNING	

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PJUES "'DSPENI



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Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (paid) LATILLES LES ISMIT MESTING DATE 75 MAY 7011
MAME OF CROUP/ORCANIZATION ((fapplicable)
ADDRESS 333 B. MYLEN VIDEN ROAD ZIP 55750
home phone <u>450 947 3516</u> work phone
B-MAIL ADDRESS (optional).
DIWISH TO SPEAK ON AGENDA MEMO DIWISH TO DONATE MY TIME TO MARY RESIDENT
DIWISH TO SPEAK DURING PUBLIC COMMENT [®] CONCERNING
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HOW TO ADDRESS THE BOARD AND COMMISSION

4

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PJUSTTO SPEM + 3 Cots

Request to Speak cards must be submitted to City Staff [3] FORT public testimony begins.

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NAME (PARIS - HOLDI) MEETING DATE	3/25/W
NAME OF GROUP/ORGANIZATION (Yapplicable)	
address 6325 N. 83vd St.	<u>ap 45250</u>
HOME PHONE 460-275-7363 WORK PHONE	
E-MAIL ADDRESS (optional) Khughesh@ any. edu. ; kahi	
THE WISH TO SPEAK ON AGENDA THEM TO DONATE MY TIME	
I WISH TO SPEAK DURING PUBLIC COMMENT [®] CONCERNING	
Citizens man compilete are Reguest to Speak "Public Comment" card per meeting and submit its	in Clin Staff "Public Countries" there is

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REQ JEST') SPEAK

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NAME (print) Annie Hoyle	MEETING DATE
NAME OF GROUP/ORGANIZATION (if applicable)	[- [· · ·
ADDRESS 8346 E LOMA AND SCOT	4sdale zip 85251
HOME PHONE (450) 481-906 work	
E MAIL ADDRESS (optional) TOWNOUS COX .	
7,000	TO DONATE MY TIME TO Kelly Halpin
(* UNISH TO SPEAK DURING PUBLIC COMMENT * CONCE	J

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NAME (paid)	S FEU E	RING	M==1	ING DATE	11MB 2 2	<u>.s</u>	2011
NAME OF CR	OUP/ORGANIZAT	TON (<i>Faplicable</i>)_					
ADDRESS	800 8 E	Tacken	BW		ZP_2	J8 2 8°	9
		5	WORKPHONE_	PS GE			
			Q Cox.				
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PM LEST DEPENI



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NAME (dain) Kelly [46][177] Meeting date <u>5/25/11</u>
WAME OF GROUP/ORGANIZATION (Magnitudia)
ADDRESS 8413 E. MUSTARO Travil Scottisdale IP 95258
HOME PHONE 470 905 0258 WORK PHONE
E-MAIL ADDRESS (gylloxd)
DIWISH TO SPEAK ON AGENDA ITEM (*)
DIWISH TO SPEAK DURING PUBLIC COMMENT [®] CONCERNING

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REQUEST TO SPEAK +3 Cords

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NAME (print) NO ROBERS MEETING DATE 5/	25/2011
NAME OF GROUP/ORGANIZATION (if applicable)	
ADDRESS COOSIN BIST PI	zip_85250
HOME PHONE WORK PHONE	
	······································
E MAIL ADDRESS (optional) Stroberts@ & Cox Net	
I WISH TO SPEAK ON AGENDA ITEM # I WISH TO DONATE MY TIME TO _	
☐ I WISH TO SPEAK DURING PUBLIC COMMENT * CONCERNING	

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NAME (print) LY10 VIW WAX MEETING DATE 6/25/11
NAME OF GROUP/ORGANIZATION (if applicable)
ADDRESS 4902 E Calle del Norte zip 85018
HOME PHONE (0) 2354 1333 WORK PHONE
E MAIL ADDRESS (optional) CSNI (WG) WXI 'NCH
I WISH TO SPEAK ON AGENDA ITEM # I WISH TO DONATE MY TIME TO Shellen RoseA
☐ I WISH TO SPEAK DURING PUBLIC COMMENT * CONCERNING

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NAME (print) Stuch VIWUTALLS MEETING DATE SIJ	5 11
NAME OF GROUP/ORGANIZATION (<i>if applicable</i>)	
ADDRESS 4902 & Calle del Norte	ZIP 850/8, -
HOME PHONE (10) 3547333 WORK PHONE (102820190	13 T
E MAIL ADDRESS (optional)	- 5 5
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I WISH TO SPEAK DURING PUBLIC COMMENT" CONCERNING	
*Citizens may complete one Request to Speak Public Comment, card per meeting and submit it to City States of Comments of The Board and Commission may hear a Public Public Comments.	aff 2) Public Comments time i
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This card constitutes a publicire cord under Arizona law

HOW TO ADDRESS THE BOARD AND COMMISSION

The Chair will call your name when it is your turn to speak

Approach the podium and state your name and address for the record

Groups wishing to speak are encouraged to select a spokesperson to represent the views of the group

Public testimony is limited to three minutes per speaker (At the Chair's discretion speakers representing two or more persons may be granted additional time)

A timer light located at the podium will help you to time your comments

A green light indicates the timer has been activated

A yellow light indicates there is one minute remaining

A red light indicates the comment period has ended



QUEST TO SPEAK



Request to Speak cards must be submitted to City Staff <u>ELECTE</u> public testimony begins.

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Cards for designated speakers and the person(s) they represent must be submitted together.

AME (puta) MORY ARMON MESTING DATE 5 BS BOUL
AME OF CROUPIORCANIZATION (If applicable)
DDRESS 10487 E. S. Salvada. ZIP R.S. 3/8
ome phone 480 - 596 - 998 6 work phone 480 948 - 838 3
MAIL ADDRESS (optional) from march of lusa yahoo los
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MAME (pata) SK. O. Sh \ 220 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	MEETING DATE	<u> 5 • 25 • 1, 1</u>	
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address 6261 W. GRaite Re			•
HOME PHONE 480 · GUS · BAB2 W			
E-MAIL ADDRESS (Optional) K 10103 Q 5 M			
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AQUEST TO SPEAK



Request to Speak cards must be submitted to City Staff <u>277.73</u> public testimony begins.

Public testimony is limited to three (3) minutes per speaker.

Additional time MAY be granted to speakers representing two or more persons.

Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (WIN) DIGNA TOULINS beard MEETING DATE 5 25
MAME OF GROUP/ORGANIZATION (If applicable)
ADDRESS 5809 N. 83 Vd Sit Scaled IIP 85250
HOME PHONE 480-529-1218 WORK PHONE
E-MAIL ADDRESS (optional)
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COURT TO SPEAK

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NAME (MANY) OSEMA-RY FOSTER MEETING DATE 5/25/11
MAME OF GROUP/ORGANIZATION ((Fapplicable))
ADDRESS 1625 E. Comment K. 4333 B. ZIP 65251
HOME PHONE AND -9 48 - LUB 1 WORK PHONE
E-MAIL ADDRESS (optional)
DIWISH TO SPEAK ON ACENDA ITEM # DAWISH TO DONATE MY TIME TO SAAAN SEEN BIGS
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QUEST TO SPENK



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Public testimony is limited to three (6) minutes per speaker.

Additional time MAY be granted to speakers representing two or more persons.

Cards for designated speakers and the person(s) they represent must be submitted together.

ME (putal) <u>SANNTA GIOCIANO</u> MEETING DATE <u>5/25/1/</u>
ME OF GROUP/ORGANIZATION (If applicable)
dress 8513 E ROVEY AVE ZIP 85250
MEPHONE YRG-945-1505 WORK PHONE
WAIL ADDRESS (optional)
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COURTOSPENI



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NAME (print) Nolan Flu Esso & Meeting Date 5/	1/25 J/W
MAME OF GROUP/ORGANIZATION (If applicable)STG// (GARA) & WALLAGE	?
ADDRESS BYTT E. MALCOTAL BILL	ZP <i>9535</i> 0
HOME PHONE 480 - 991 - 9062 WORK PHONE 1916	
E-MAIL ADDRESS (optional) 12/1/	
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R JUST TO SPAN



Request to Speek cards must be submitted to Gity Staff <u>FIFOR</u> public testimony begins.

Public testimony is limited to three (C) minutes per speaker.

Additional time MAY be granted to speakers representing two or more persons.

Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (putal) SOS MOYSON	MEETING DATE	S/@S//\\
MAME OF GROUP/ORGANIZATION (Mapple)		
ADDRESS BLDD & BANGAWAY	THE BUID GENTTERMY	ZP_8535//
HOME PHONE		
E-MAIL ADDRESS (optional)		
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RAMEST TO SPAN

Request to Speak cards must be submitted to Gity Staff BEFORE public testimony begins.

Public testimony is limited to three (8) minutes per specker.

Additional time MAY be granted to speckers representing two or more persons.

Oards for designated speckers and the person(s) they represent must be submitted together.

MANTE (print)	5/29/11
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ADDRESS & 102 East Latinglite Mail.	zip <u>7626 î</u>
HOME PHONE WORK PHONE	· · · · · · · · · · · · · · · · · · ·
E-MAIL ADDRESS (optional)	
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I WISH TO SPEAK DURING "PUBLIC COMMENT" CONCERNING	

Critizens may complete one Request to Speak "Public Comment" card per meeting and submit it to City Staff. "Public Comment" time is reserved for citizen comments regarding non-agendized tiems. The Board and Commission may bear "Public Comment" testimony, but is prohibited by state law from discussing tiens which are not listed on the agenda.

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CTUST TO SPENI

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Public testimony is limited to three (6) minutes per speaker.

Additional time MAY be granted to speakers representing two or more persons.

Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (DATE 5/95)
NAME OF CROUP/ORCANIZATION (Mapplicable)
ADDRESS 9413 P. MUSATURG TRUIL SCAPS. 21785258
HOME PHONE WORK PHONE
E-MAIL ADDRESS (optional)
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RAJUST TO SPEM



Request to Speak cards must be submitted to City Staff <u>FIROR</u> public testimony begins.
Public testimony is limited to three (3) minutes per speaker.
Additional time MAY be granted to speakers representing two or more persons.
Cards for designated speakers and the person(s) they represent must be submitted together.

MAME (2710) VASIC HOLENY MEETING DATES 25 LI
NAME OF GROUP/ORGANIZATION (Fapplicable)
ADDRESS RUIS E. MMONTOUNETIVAUL SCOTTS ZIP 85258
HOME PHONE WORK PHONE
E-MAIL ADDRESS (optional)
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RYUST TO SPEM



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Public testimony is limited to three (8) minutes per speeker.

Additional time MAY be granted to speekers representing two or more persons.

Cards for designated speekers and the person(s) they represent must be submitted together.

MANTE (MATA) . JERNARE MARKET MEETING DATE 5.26.1
NAME OF GROUPIORGANIZATION (Familicable) OLPH/SMC-Schoolf chCharches
ADDRESS 4525 N. 87 Place Seitzlik AZ ZIP 8527
HOME PHONE (480) 433-2932 work Phone
E-MAIL ADDRESS (optional)
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U I WISH TO SPEAK DURING PUBLIC COMMENT [®] CONCERNING
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This card constitutes a public record under Arizona law.

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- A timer light, located at the podium, will help you to time your comments.
 - A green light indicates the timer has been adjusted.
 - on his series there is one minute remaining.
 - A red light indicates the comment period has ended.



RYUSTTOSPAN



Request to Speek cards must be submitted to City Staff <u>STATAR</u> public testimony begins.

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Additional time MAY be granted to speakers representing two or more persons.

Cards for designated speakers and the person(s) they represent must be submitted together.

NAME (DATE) PARENT MOLTAN MEETING DATE 5 25 11
NAME OF CROUP/ORGANIZATION (Fapplicable)
ADDRESS 8413 E. MUSTANR FRANK SCOTTA OF 95258
HOME PHONE 480 905 2358 WORK PHONE
E-MAIL ADDRESS (optional)
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1 10 40 - 0
DIWISH TO SPEAK DURING FUBLIC COMMENT ² CONCERNING HANG

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NAME (print) Alexis Deering	MEETING DATE	15 2011
NAME OF GROUP/ORGANIZATION (<i>If applicable</i>	e) St Maria Goveth So	chool
ADDRESS 6261 NI Grante	Rut	ZIP
ADDRESS 6261 NI Grante BUS HOME PHONE 480 948 3606	WORK PHONE	
E MAIL ADDRESS (optional)		<u>.</u>
☐ I WISH TO SPEAK ON AGENDA ITEM #	I WISH TO DONATE MY TIME TO _	Soe Meyer
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IM IS" OSPAI



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NAME (MAN) 15 AR1 1 SHERIMIKA MEETING DATE S/25/901.
NAME OF GROUP/ORGANIZATION (f/applicable)
ADDRIESS CUSTO M. TREW WEST TO THE TOP SEES SO
HOME PHONE 424 7309 WORK PHONE 248 9308059
E-MAIL ADDRESS (optional)
$ \overline{\mathbb{Q}} $ wish to speak on agenda item $ \overline{\mathbb{Q}} $ $ \overline{\mathbb{Q}} $ $ \overline{\mathbb{Q}} $ i wish to donate my time to $\underline{\hspace{0.5cm}} $
IN WISH TO SPEAK DURING PUBLIC COMMENT ¹³ CONCERNING
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M THE TO SPAN



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NAME (WIN) SOM MINISTER OF	MEETING DATE	5-25-61
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ADDRESS	NBI GTREET	7IP_ <i>&\$52.5</i> (3)
HOME PHONE	WORK PHONE	
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NAME (print)	PICHARD	108BLAG	MEETING DATE	5-25-11	
NAME OF GROL	JP/ORGANIZATION (if appl	licable) _ CIF	ZON		
ADDRESS	503	7 N BL 57		ZIP & 5258	
HOME PHONE_		work	PHONE		
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