

Neighborhood Notification
Open House Information
Citizen Comments
Affidavit of Posting
Site Sign
Legal Protest

Citizen
Review



Current Planning Services
Long Range Planning Services

NOTICE OF INSPECTION RIGHTS
A.R.S. § 9-833

You have the right to:

- Have the City staff member present a photo ID.
- Have the City staff member state the purpose for the planning inspection and legal authority to conduct it.
- Know the amount of inspection fees if applicable.
- An on-site representative may accompany the City staff member during the inspection except during confidential interviews and may:
 - Receive copies of any documents taken during the inspection.
 - Receive a split of any samples taken during the inspection.
 - Receive copies of any analysis of the samples taken when available.
- Be informed if statements are being recorded.
- Be given notice that any statements may be used in an inspection report.
- Be presented with a copy of your inspection rights.
- Be notified of the due process rights pertaining to an appeal

You are hereby notified and informed of the following:

- The inspection is conducted pursuant to the authority of A.R.S § 9-462.05. and/or Scottsdale Revised Code, Appendix B, Article I, Section 1.203.
- Any statements made by anyone interviewed during this inspection may be included in the inspection report.
- Information on appeal rights related to this inspection is found under Scottsdale Revised Code, Appendix B, Article I, Section 1.801.
- There is no inspection fee associated with this inspection.

I acknowledge I have been informed of my inspection rights. If I decline to sign this form, the inspector(s) may still proceed with the inspection.

If I have any questions, I may contact the City staff member, Ben Moriarty
at the following number 480-312-2836.

Signature: [Signature] Date: 1 15 19

Printed Name: CORNEL MATEJ

Check box if signature refused

Copy of Bill of Rights left at: 9023 E. Julian Dr. Scottsdale 85260

Request for Site Visits and/or Inspections

Development Application (Case Submittals)



This request concerns all property identified in the development application.

Pre-application No: 1018 -PA- 2018

Project Name: ARIZONA Royal Home Care

Project Address: 9823 E. JENKIN DR. Scottsdale 85260

STATEMENT OF AUTHORITY:

1. I am the owner of the property, or I am the duly and lawfully appointed agent of the property and have the authority from the owner to sign this request on the owner's behalf. If the land had more than one owner, then I am the agent for all owners, and the word "owner" refer to them all.
2. I have the authority from the owner to act for the owner before the City of Scottsdale regarding any and all development application regulatory or related matter of every description involving all property identified in the development application.

STATEMENT OF REQUEST FOR SITE VISITS AND/OR INSPECTIONS

1. I hereby request that the City of Scottsdale's staff conduct site visits and/or Inspections of the property identified in the development application in order to efficiently process the application.
2. I understand that even though I have requested the City of Scottsdale's staff conduct site visits and/or Inspections, city staff may determine that a site visit and/or an inspection is not necessary, and may opt not to perform the site visit and/or an inspection.

Property owner/Property owner's agent: CORNEL MATEU Print Name

[Signature] Signature

| | |
|---|--------------------|
| City Use Only: | |
| Submittal Date: _____ | Case number: _____ |
| Planning and Development Services 7447 E Indian School Road, Suite 105, Scottsdale, AZ 85251 ♦ www.ScottsdaleAZ.gov | |

2018

REQ EST ' O SPEAK



3

Request to Speak cards must be submitted to City Staff **BEFORE** 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 (print) PAUL R. MESSINGER MEETING DATE Sept 4, 2019

NAME OF GROUP/ORGANIZATION (if applicable) SELF

ADDRESS 11060 N. 94th St. - Scott. AZ 85260 ZIP 85260

HOME PHONE 602-826-0812 WORK PHONE 480-860-2300

E-MAIL ADDRESS (optional) NONE

I WISH TO SPEAK ON AGENDA ITEM # 8-BA-2019 FOR PASSAGE I WISH TO DONATE MY TIME TO _____
If Needed 8-BA-2019 FOR PASSAGE
8-BA-2019 (9823 E. JONAN DR)

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 Staff. "Public Comment" time is reserved for citizen comments regarding non-agendized items. The Board and Commission may hear "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.

Request to Speak cards must be submitted to City Staff before public testimony begins on that item.

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.
 - o A green light indicates the timer has been activated.
 - o A yellow light indicates there is one minute remaining.
 - o A red light indicates the comment period has ended.

WRITTEN COMMENTS: Citizens who do not wish to address the Board and Commission in person may submit written comments by completing a white Written Comment card. Written Comment cards are available throughout the Kiva Forum and at the Staff table.

REQUEST TO SPEAK



X3

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NAME (print) JEFF CARLBERG MEETING DATE 9-4-19

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS _____ ZIP _____

HOME PHONE _____ WORK PHONE _____

E-MAIL ADDRESS (optional) _____

I WISH TO SPEAK ON AGENDA ITEM # 4 I WISH TO DONATE MY TIME TO _____

I WISH TO SPEAK DURING "PUBLIC COMMENT"* CONCERNING _____

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REQUEST TO SPEAK



4

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NAME (print) Mariette Kort MEETING DATE Aug 7 2019

NAME OF GROUP/ORGANIZATION (if applicable) _____

ADDRESS 9940 E. Jenan Drive ZIP 05260

HOME PHONE 400-860-2213 WORK PHONE _____

E-MAIL ADDRESS (optional) _____

I WISH TO SPEAK ON AGENDA ITEM # 4 I WISH TO DONATE MY TIME TO _____

I WISH TO SPEAK DURING "PUBLIC COMMENT"* CONCERNING _____

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