

Consent

**SPEAKER'S CARD (Please Print)**

Agenda# F.1  
(2)

NAME Courtney Barker

ADDRESS 505 Cassia Blvd

Sat Bk CITY #7 STATE 32937 STREET ZIP CODE

ORGANIZATION YOU REPRESENT SELF City of Satellite

SUBJECT / Agenda # F-1

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

[Signature]  
Signature

10/9/18  
Date

Consent

**SPEAKER'S CARD (Please Print)**

Agenda# F.1

NAME Sandra Sullivan

ADDRESS 165 Dorset Lane

South Patrick Shores CITY # STATE 32937 STREET ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # F1

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Sandra Sullivan  
Signature

10-9-18  
Date

Public Comment

G.

(3)

**SPEAKER'S CARD (Please Print)**

NAME Stel Bailey

ADDRESS 1395W Baker Circle

Cocoa # FL STREET 32927  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT Florida Health Connection

SUBJECT G

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Ch Bailey  
Signature

10-9-18  
Date

AGENDA #
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**SPEAKER'S CARD (Please Print)**

Agenda# G

(4)

NAME Daniel W. Willm

ADDRESS 430 Winchester Rd

Sat. Beach # FL STREET 32932  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF X

SUBJECT / Agenda # G

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Daniel Willm  
Signature

10-9-18  
Date

**SPEAKER'S CARD (Please Print)**

Agenda# E1

NAME Bill Young

ADDRESS 612 Indian Run

Titusville # FL STREET 32786  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF FREA

SUBJECT / Agenda # Salary

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Bill Young  
Signature

Date

*Public Comment*

**SPEAKER'S CARD (Please Print)**

Agenda# CGC  
(2)

NAME GAIL MEREDITH

ADDRESS Satellite Beach

# STREET  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # Treatment of the Pool in Budget Charities

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Gail Meredith  
Signature

Date

**SPEAKER'S CARD (Please Print)**

Agenda# \_\_\_\_\_

NAME Courtney Baker

ADDRESS \_\_\_\_\_ # \_\_\_\_\_ STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

ORGANIZATION YOU REPRESENT / SELF \_\_\_\_\_

SUBJECT / Agenda # 41-4

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

[Signature]  
Signature

\_\_\_\_\_  
Date

Public Comment

9  
①

**SPEAKER'S CARD (Please Print)**

NAME Sandra Sullivan

ADDRESS 165 Dorset Lane

South Patrick Shores # \_\_\_\_\_ STREET 32937  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT Self

SUBJECT Public Comment C

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Sandra Sullivan  
Signature

9 Oct 18  
Date

AGENDA  
\_\_\_\_\_  
\_\_\_\_\_

**SPEAKER'S CARD (Please Print)**

Agenda# H.4

NAME Mary Sphar (8)

ADDRESS 825 Cliftons Cove Ct

Cocoa # FL STREET 32926  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF Turtle Coast Sierra Club

SUBJECT / Agenda # Ordinance Replacing the 150-day  
Conventional Septic Moratorium

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE  
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Mary Sphar  
Signature

10-9-18  
Date

*Public Hearing*

**SPEAKER'S CARD (Please Print)**

Agenda# H-4

NAME Bo Platt (9)

ADDRESS 844 W. Whitmore Dr

Melbourne # FL STREET 32935  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF (9)

SUBJECT / Agenda # H4 - 150 day septic  
moratorium

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE  
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Bo Platt  
Signature

10-9-2018  
Date

Public Hearing

**SPEAKER'S CARD** (Please Print)

Agenda# 4.4  
(7)

NAME TONY SASSO

ADDRESS 319 CYPRUS DR.  
# STREET

CB  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF \_\_\_\_\_

SUBJECT / Agenda # H-4

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

[Signature]  
Signature

10/9/18  
Date

Public Hearing

**SPEAKER'S CARD** (Please Print)

Agenda# H4  
(7)

NAME PAM LASALLE

ADDRESS 2380 CAMBERLY CIR  
# STREET

MELBOURNE FL 32940  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF \_\_\_\_\_

SUBJECT / Agenda # H4 - SEPTIC

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

[Signature]  
Signature

10-9-2018  
Date

PUBLIC HEARING

**SPEAKER'S CARD (Please Print)**

Agenda# H 4  
(4)

NAME GAIL MEREDITH

ADDRESS Satellite Beach  
# \_\_\_\_\_ STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

ORGANIZATION YOU REPRESENT / SELF LAGOON Coalition BIRLC

SUBJECT / Agenda # Moratorium

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Gail Meredith  
Signature \_\_\_\_\_

\_\_\_\_\_ Date

Public Hearing

**SPEAKER'S CARD (Please Print)**

H.4  
(5)

NAME PHILIP STASIK

ADDRESS 3792 SIERRA DR.  
MERRITT ISLAND # FL STREET 32953  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT SPACE COAST PROGRESSIVE ALLIANCE

SUBJECT STRENGTHEN SEPTIC MORATORIUM & UPGRADE SEWER SYSTEMS -- PLEASE!

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Philip Stasik  
Signature \_\_\_\_\_

10-9-18  
Date

AGENDA  
H-4

Pub. Hearing

H.4

SPEAKER'S CARD (Please Print)

(2)

NAME ANDY STEINBERG  
 ADDRESS 1938 GYH AVE SE  
VERO BEACH # FL STREET 33962  
 CITY STATE ZIP CODE  
 ORGANIZATION YOU REPRESENT CCA FLORIDA  
 SUBJECT SEPTIC H-#

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

[Signature]  
Signature

10/9/18  
Date

AGENDA #
H4

Public Hearing

H.4

SPEAKER'S CARD (Please Print)

(3)

NAME Low Koutnik  
 ADDRESS 3208 Brvd Song Ct  
Melbourne # FL STREET 32934  
 CITY STATE ZIP CODE  
 ORGANIZATION YOU REPRESENT Brevard Indian River Coalition  
 SUBJECT Septic Manatorium H 4

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

[Signature]  
Signature

10/9/18  
Date

AGENDA

Public Hearing

H.2

(1)

**SPEAKER'S CARD (Please Print)**

NAME Brad Bettis

ADDRESS 96 Willard Street Suite 302

Cocoa # FL STREET 32922

CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT Thomas & Elizabeth Vitella

SUBJECT Atty for property owners seeking vacation of Stub Right of Way

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Signature

10-9-18

Date

AGENDA  
H.2

Public Hearing

H.4

(1)

**SPEAKER'S CARD (Please Print)**

NAME Frank Gidus

ADDRESS 4730 Lake Sharp Dr.

Orlando # FL STREET 32817

CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT Coastal Conservation Assoc.

SUBJECT Septic Moratorium H-4

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Signature

10/9/18

Date

AGENDA

Public Comment **SPEAKER'S CARD** (Please Print)

Agenda# 5  
(6)

NAME MR Charles A Tovey

ADDRESS 2555 Roberts Rd Melbourne  
# FLA STREET 32940  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / Public Comment  
SELF

SUBJECT / Agenda # Floodway

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Charles A Tovey Jr  
Signature

10-9-2018  
Date

Public Hearing (If necessary) H1  
(1)

**SPEAKER'S CARD** (Please Print)

NAME Cliff Repperger Rossway Swan

ADDRESS 1901 S Harbor City Blvd #500  
Melbourne # FL STREET 32901  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT Barefoot Bay Recreation Dist

SUBJECT Ordinance Amending BBRD Charter to Impose Term Limits

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

[Signature]  
Signature

10/9/18  
Date

AGENDA  
H1

New District

**SPEAKER'S CARD** (Please Print)

Agenda# 7.5  
(1)

NAME Paul Novik

ADDRESS \_\_\_\_\_  
# \_\_\_\_\_ STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

ORGANIZATION YOU REPRESENT / SELF Uiera Complex Food Services

SUBJECT / Agenda # \_\_\_\_\_

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

X Paul Novik  
Signature

10-9-8  
Date

Public Comment

**SPEAKER'S CARD** (Please Print)

Agenda# 9  
(5)

NAME Tiffany Johnson

ADDRESS 1350 Westover St. #829  
# \_\_\_\_\_ STREET \_\_\_\_\_  
Melbourne FL 32935  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF 9 Community, Supporting FHC 9

SUBJECT / Agenda # 9 #fightforzero

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Tiffany Johnson  
Signature

10/9/18  
Date

Public Hearing

**SPEAKER'S CARD (Please Print)**

Agenda# 4.3  
(6)

NAME Courteny Baker

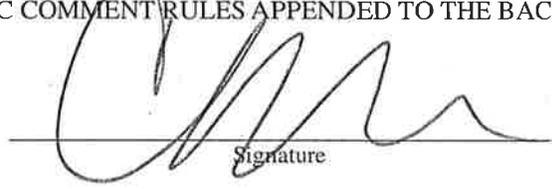
ADDRESS 5103 Cassia Blvd

Salt Lake CITY UT STATE 32937 STREET ZIP CODE

ORGANIZATION YOU REPRESENT / SELF City of Salt Lake City

SUBJECT / Agenda # H-3

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

  
Signature

10/9/18  
Date

New Business

**SPEAKER'S CARD (Please Print)**

Agenda# J2  
(1)

NAME Michael Chantam

ADDRESS 834 WASHBURN RD

Meriville CITY UT STATE 32934 STREET ZIP CODE

ORGANIZATION YOU REPRESENT / SELF MOVABLE ROCKS LLC

SUBJECT / Agenda # J2

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

  
Signature

10.9.18  
Date

Public Hearing

H.3

**SPEAKER'S CARD (Please Print)**

(3)

NAME Lew Kontnik

ADDRESS 3208 Bird Song Ct

Brevard # FL STREET 32934  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT Brevard Indian River Coalition

SUBJECT Septic Codes H3

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.



10/19/18

Signature

Date

AGENDA #

Public Hearing

**SPEAKER'S CARD (Please Print)**

Agenda# H.3

(3)

NAME Mary Sphar

ADDRESS 825 Cliftons Cove Ct

Cocoa # FL STREET 32926  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Turtle Coast Sierra Club

SUBJECT / Agenda # Ordinance Amendments to Update Existing Septic Codes

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.



Signature

10-9-18  
Date

Public Hearing

H.3

**SPEAKER'S CARD (Please Print)**

①

NAME George Rosenfield

ADDRESS 1289 Bonaventure Dr

Melbourne # FL STREET 32940  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT self

SUBJECT H3

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

George Rosenfield 10/09/18  
Signature Date

AGENDA  
\_\_\_\_\_

Public Hearing,

**SPEAKER'S CARD (Please Print)**

Agenda# H3

NAME GAIL MEREDITH

③

ADDRESS Satellite Blvd

\_\_\_\_\_ # \_\_\_\_\_ STREET  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # \_\_\_\_\_

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Gail Meredith  
Signature

\_\_\_\_\_ Date

**SPEAKER'S CARD (Please Print)**

Agenda# 4-3

NAME VINCE LAMB ④

ADDRESS 1590 DRAGON POINT DR

MORRIS ISLAND FL. 32552  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF \_\_\_\_\_

SUBJECT / Agenda # 43 - SEPTIC UKD

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

  
Signature

\_\_\_\_\_  
Date