

PUBLIC COMMENTS

SUPPORT

Case No/Name: 05-1523 Crosby Road Date: 4-26-15

Name: J. Richard Fleming

Address: 1506 Ross Ave.

City, ST, ZIP: Carrollton, TX 75006

I hereby register my: ☒ Support ☐ Opposition  
to the above referenced case.

Comments: \_\_\_\_\_

Received

MAY 04 2015

Planning  
City of Carrollton

Signature: Richard Fleming

Case No/Name: 05-1523 Date: 5.5.2015

Name: Clint McCain

Address: 1702 Ross Ave

City, ST, ZIP: Carrollton TX 75006

I hereby register my: ☒ Support ☐ Opposition  
to the above referenced case.

Comments: Thank you for improving  
the Highlands

Signature: Clint McCain



**CARROLLTON**  
TEXAS

## PLANNING & ZONING APPEARANCE CARD

*Please complete this card and submit it to a city staff member prior to the beginning of the meeting.*

Name Dick CALVER Phone \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

☐

Public Hearing Agenda Item # 05-1523

☒ I wish to speak IN FAVOR of this item. \_\_\_\_\_ I wish to speak IN OPPOSITION to this item.

\_\_\_\_\_ I do not wish to speak; however, please record my \_\_\_\_\_ SUPPORT \_\_\_\_\_ OPPOSITION.

Please identify the group or organization you represent, if any: \_\_\_\_\_

**Please read and comply with the attached  
"Guidelines for Speaking at City Government Public Meetings."**

OPPOSITION

Case No/Name: 05-1523 Crosby Rd Residential **Received** Date: 4/27/15  
Infill Planned Development  
Name: Kathy Thomas **MAY 07 2015**  
Address: 1801 Crosby Rd **Planning**  
City, ST, ZIP: Carrollton, TX 75006 **City of Carrollton**

I hereby register my: ☐ Support ☒ Opposition  
to the above referenced case.

Comments: Last experience tells me not to  
believe anything I'm told by the CDC,  
therefore, I will oppose this case.

Signature: Kathy Thomas


Case No/Name: Lola F Harrison Date: 4/28/15  
Name: Lola F Harrison 05-1523  
Address: 1806 E Crosby Rd / Crosby Rd  
City, ST, ZIP: Carrollton TX 75006

I hereby register my: ☐ Support ☒ Opposition  
to the above referenced case.

Comments: On Medicare & husband also  
& FRLW **Received**

**MAY 07 2015**  
Signature: Lola F Harrison **Planning**  
**City of Carrollton**

SPEAKER CARDS FROM MAY 7, 2015 PZ MEETING

 **CARROLLTON**  
TEXAS **PLANNING & ZONING APPEARANCE CARD**

*Please complete this card and submit it to a city staff member prior to the beginning of the meeting.*

Name Milene (Amy) Ayala Phone 469 2310772 Date \_\_\_\_\_

Address 1626 E Crosby Rd City Carrollton Zip 75006


☐ Public Hearing Agenda Item # 12

\_\_\_\_ I wish to speak IN FAVOR of this item. \_\_\_\_ I wish to speak IN OPPOSITION to this item.

\_\_\_\_ I do not wish to speak; however, please record my \_\_\_\_ SUPPORT \_\_\_\_ OPPOSITION.

Please identify the group or organization you represent, if any: \_\_\_\_\_

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 **CARROLLTON**  
TEXAS **PLANNING & ZONING APPEARANCE CARD**

*Please complete this card and submit it to a city staff member prior to the beginning of the meeting.*

Name DAN CLAIRBORNE Phone 972 248 5555 Date 5/7

Address 1607 Crosby Rd. City C Zip 75006

☒ Public Hearing Agenda Item # 05-1523  
#12

\_\_\_\_ I wish to speak IN FAVOR of this item. \_\_\_\_ I wish to speak IN OPPOSITION to this item.

\_\_\_\_ I do not wish to speak; however, please record my \_\_\_\_ SUPPORT \_\_\_\_ OPPOSITION.

Please identify the group or organization you represent, if any: \_\_\_\_\_

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