OFFICE OF COMMUNITY DEVELOPMENT
Diana Wheeler | *Community Development Director*

COMMUNITY INFORMATION MEETING CERTIFICATION

Case# _____

Property Address _____

Application Request _____

_____

Date range of required meeting _____

TO BE COMPLETED BY APPLICANT:

Date & time meeting held _____

Location of meeting _____

Summary of meeting _____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Applicant's signature _____

(See back for meeting sign-in sheet)

Community Information Meeting Sign-in Sheet

Name	Address