

CITY OF LOS ANGELES  
PLANNING & LAND USE MANAGEMENT COMMITTEE SPEAKER CARD

THE CITY COUNCIL'S RULES OF  
DECORUM WILL BE ENFORCED.

DATE 12-8-15

COUNCIL FILE NO. 15-1387

AGENDA ITEM NO. 3

POSITION:

Support  
Project/Proposal

Oppose  
Project/Proposal

General or  
Public Comment

Support Appeal

Oppose Appeal

SPEAKER:

Applicant

Property Owner(s)

Association

Representative

Check here if you are a paid representative

Appellant

Surrounding  
Property Owners

Organization

Other CD 2

Name Karo Torossian

Representing CD 2

Address 200 N. Spring St #435

City LA

Zip Code 90012

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

NOTE: THIS IS A PUBLIC DOCUMENT.

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ITEM NO. \_\_\_\_\_

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Oppose Appeal

SPEAKER:

Applicant

Property Owner(s)

Association

Representative

Check here if you are a paid representative

Appellant

Surrounding  
Property Owners

Organization

Other \_\_\_\_\_

Name Glenn Bloch

Representing himself, wife (Nichee Bryan) and neighbors

Address 11617 Blix Street

City Valley Village Zip Code 91602

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PLANNING & LAND USE MANAGEMENT COMMITTEE SPEAKER CARD

THE CITY COUNCIL'S RULES OF  
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DATE 12/8/15 COUNCIL FILE NO. 15-1381 AGENDA ITEM NO. #3

POSITION:  Support Project/Proposal  Oppose Project/Proposal  General or Public Comment  
 Support Appeal  Oppose Appeal

SPEAKER:  Applicant  Property Owner(s)  Association  Representative  
 Appellant  Surrounding Property Owners  Organization  Other \_\_\_\_\_  
Check here if you are a paid representative

Name Babette Wilk  
Representing self And neighbors  
Address 11565 Blix St.  
City Valley Village Zip Code 91602

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PLANNING & LAND USE MANAGEMENT COMMITTEE SPEAKER CARD

THE CITY COUNCIL'S RULES OF  
DECORUM WILL BE ENFORCED.

DATE 12/8/2015 COUNCIL FILE NO. 15-1387 AGENDA ITEM NO. 3

POSITION:  Support Project/Proposal  Oppose Project/Proposal  General or Public Comment  
 Support Appeal  Oppose Appeal

SPEAKER:  
 Applicant  Property Owner(s)  Association  Representative  
 Appellant  Surrounding Property Owners  Organization  Other \_\_\_\_\_  
Check here if you are a paid representative

Name FRANCIS PEREIRA  
Representing SELF & NEIGHBORHOOD  
Address 11581 BLX ST  
City N. HOLLYWOOD CA Zip Code 91602

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DATE 12-8-15

COUNCIL  
FILE NO. 15-1387

AGENDA  
ITEM NO. 3

POSITION:  Support  
Project/Proposal  
 Support Appeal

Oppose  
Project/Proposal  
 Oppose Appeal

General or  
Public Comment

SPEAKER:

Applicant  Property Owner(s)  Association

Representative  
Check here if you are a paid representative

Appellant  Surrounding  
Property Owners  Organization

Other \_\_\_\_\_

Name DAVE RAND

Representing Applicant West Coast Heavy Partners LLC

Address \_\_\_\_\_

City \_\_\_\_\_

Zip Code \_\_\_\_\_

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# CITY OF LOS ANGELES SPEAKER CARD

**NOTE: THIS IS A PUBLIC DOCUMENT. YOU ARE NOT REQUIRED TO PROVIDE PERSONAL INFORMATION IN ORDER TO SPEAK, EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU.**

Date 12/8/18

Agenda Item 3

I wish to speak before the PLUM  
~~BOARD OF PUBLIC WORKS~~  
Name of City Agency, Department, Committee or Council

Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? ( ) For proposal  
Name: Wagner from Encino  Against proposal  
( ) General comments

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

**CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:**

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_  
Street City State Zip

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Date 12.8.15

Agenda Item 5

*PLUM*

I wish to speak before the BOARD OF PUBLIC WORKS  
Name of City Agency, Department, Committee or Council

Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? ( ) For proposal  
Name: Wayne Hitler (X) Against proposal  
( ) General comments

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

**CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:**

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Client Address: \_\_\_\_\_  
Street City State Zip

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