

Exhibit B

THE OFFICE OF THE LEE COUNTY HEARING EXAMINER

PUBLIC PARTICIPATION FORM

(Please Print Legibly)

CASE NAME: _____

PARTICIPANT NAME(S): _____

EMAIL ADDRESS: _____

ELECTRONIC COPY OF THE HEARING EXAMINER RECOMMENDATION/DECISION WILL BE SENT TO THE EMAIL ADDRESS UNLESS NONE PROVIDED. Please note that by providing an email address, you will also receive notice of the final Board of County Commissioners hearing via email.

RECOMMENDATION/DECISION will be posted online at www.leegov.com/hearingexaminer/search-rendered-decisions-recommendations

IF EMAIL ADDRESS NOT AVAILABLE:

Participant Mailing Address: _____

(city) (state) (zip code)

IMPORTANT NOTICE

MEMBERS OF THE PUBLIC MUST SPEAK BEFORE THE HEARING EXAMINER IN ORDER TO SPEAK AT THE BOARD OF COUNTY COMMISSIONERS' MEETING ON THIS CASE.

/Y/ /N/

YOU MAY TEAR THE BOTTOM OF THIS PAGE FOR WEBSITE INFORMATION

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