## MINUTES OF THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA



## **PUBLIC COMMENT:**

<u>15-1</u>

During the oral communication section of the agenda for Tuesday, November 7, 2017, Denise Wilson, John Benisch, Brad Elliot, Steve Main, Rob Wilson, Chris Little, Kristin Gilliam, Roman Mendez, Paul Rodriguez, Jr., and James Logue representing Desert Jet Center spoke regarding issues with EDA..

ATTACHMENTS FILED WITH CLERK OF THE BOARD

Date: November 7 A	genda #: Public	
	Wilson	
Address: 81060 Shinne cock H15  (Only required if follow-up mail response is requested)		
city: <u>La Quenta</u> z	lip: 92253	
Phone #:9099693139 E	mail:	
I AM: ☐ The Applicant	☐ A Neighbor	
☐ Applicant's Representative	Other Interested Party	
PLEASE INDICATE YOUR POSITION BELOW:		
☑ I wish to speak ☐ I DO NOT wish to speak ☐ I wish to speak with a Media Presentation		
☐ I YIELD my 3 minutes to the following speaker: (Maximum 2 Yields per Speaker)		
(Name)		
Position on Agenda Item:  In Favor  Neutral	☐ Opposed	

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	(-wol/C	
Date: 11/7/17	Agenda#: Connert	
SPEAKÉR'S NAME:	n Benisch (Print Name)	
Address:(Only required if follow-	-up mail response is requested)	
City:		
Phone #:	Email:	
I AM: ☐ The Applicant	☐ A Neighbor	
☐ Applicant's Representative	Other Interested Party	
PLEASE INDICATE YOUR POSITI	ON BELOW:	
I wish to speak ☐ I DO NOT wish to speak☐ I wish to speak☐ I wish to speak with a Media Presentation		
☐ I YIELD my 3 minutes to the fo (Maximum 2 Yields per Speaker)	llowing speaker:	
(Name)		
Position on Agenda Item: ☐ In Favor ☐ Neutra	al Dpposed	
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Date: 11/7/17 Agenda #: Public Consumb	
SPEAKER'S NAME: Brain Elliott (Print Name)	
Address: 51315 CAILE HURNEME  (Only required if follow-up mail response is requested)	
City: La Quista zip: 92253	
Phone #: 407-401-4525 Email: brad relliate gmilion	
I AM:  ☐ The Applicant ☐ A Neighbor	
☐ Applicant's Representative	
PLEASE INDICATE YOUR POSITION BELOW:	
☑ I wish to speak ☐ I DO NOT wish to speak ☐ I wish to speak with a Media Presentation	
I YIELD my 3 minutes to the following speaker: (Maximum 2 Yields per Speaker)	
(Name)	
Position on Agenda Item:  In Favor  Neutral  Dpposed	

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Submit request to the Clerk of Board. Speakers are

entitled to three (3) minutes, subject to Board Rules listed on the reverse side of this form. \_\_\_\_\_Agenda #: \_\_\_\_\_CON NO. A\_\_\_\_\_ Date: 07-NOV 2017 SPEAKER'S NAME: HERVAL Phone #: 760 399-1000 I AM: ☐ The Applicant ☐ A Neighbor ☐ Applicant's Representative Other Interested Party PLEASE INDICATE YOUR POSITION BELOW: 🙎 I wish to speak 🔲 I DO NOT wish to speak Twish to speak with a Media Presentation ☐ I YIELD my 3 minutes to the following speaker: (Maximum 2 Yields per Speaker) Position on Agenda Item: ☐ In Favor ☐ Neutral Opposed

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	Agenda#:
Date:	Agenda #:
SPEAKER'S NAME: Rest N	) LSON (Print Name)
Address: (Only required if follows	-up mail response is requested)
city: La Quinter	
Phone #: 900 969 3136	
I AM: ☐ The Applicant	☐ A Neighbor
Applicant's Representative	
PLEASE INDICATE YOUR POSITI	ON BELOW:
☑ Wish to speak ☐ I DO NOT☐ I wish to speak with a Media F	wish to speak Presentation
I YIELD my 3 minutes to the fo (Maximum 2 Yields per Speaker)	llowing speaker:
(Name)	·
Position on Agenda Item: In Favor	I Opposed

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on the reverse side of this form.		
Date: 117/17 Agenda # Coma on 1		
SPEAKER'S NAME: CHIS UTIL		
(Print Name)		
Address:(Only required if follow-up mail response is requested)		
City:Zip:		
Phone #: 203 305 (588 Email:		
I AM: ☐ The Applicant ☐ A Neighbor		
☐ Applicant's Representative ☐ Other Interested Party		
PLEASE INDICATE YOUR POSITION BELOW:		
☐ I wish to speak ☐ I DO NOT wish to speak ☐ I wish to speak with a Media Presentation		
I YIELD my 3 minutes to the following speaker: (Maximum 2 Yields per Speaker)		
Clas Utt UE		
(Name)		
Position on Agenda Item:  In Favor Neutral Opposed		

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	Public
Date: 11 7 17	Agenda#: Consist
SPEAKER'S NAME: KRIS	tin Cilliam (Print Name)
Address:(Only required if follow-up r	nail response is requested)
city: La Quinta	
Phone #: 760-399-1000	) Email:
I AM: ☐ The Applicant	☐ A Neighbor
Applicant's Representative	Other Interested Party
PLEASE INDICATE YOUR POSITION BELOW:	
☐ I wish to speak ☐ I DO NOT wish to speak ☐ I wish to speak with a Media Presentation	
☐ I YIELD my 3 minutes to the following speaker: (Maximum 2 Yields per Speaker)	
Jane)	KRISTIN Gilliam
Position on Agenda Item:  In Favor  Neutral	☐ Opposed

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Date: (1/1/1	Public
Date:	Agenda #:
SPEAKER'S NAME: Roman	Menclez (Print Nama)
Address:	
	v-up mail response is requested)
City:	Zip:
Phone #:	Fmail
	LIIIdii,
I AM: ☐ The Applicant	☐ A Neighbor
Applicant's Representative	Other Interested Party
<b>-</b>	,
PLEASE INDICATE YOUR POSIT	ION BELOW:
☑ I wish to speak ☐ I DO NOT ☐ I wish to speak with a Media I	wish to speak Presentation
I YIELD my 3 minutes to the fo (Maximum 2 Yields per Speaker)	ollowing speaker:
Roman Mendez (Name)	
Position on Agenda Item:	
☐ In Favor ☐ Neutr	al Opposed

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Date: 11/7/2017	Agenda #:
SPEAKER'S NAME: Faul N K	Och vez Jr (Print Name)
Address:	mail response is requested)
City: India	
Phone #: (746) 625 -8554	Email: Paul Rod O 9 Qg mal 1. 10 m
I AM: ☐ The Applicant	☐ A Neighbor
Applicant's Representative	Other Interested Party
PLEASE INDICATE YOUR POSITION	N BELOW:
<ul><li>☑ I wish to speak ☐ I DO NOT wi</li><li>☐ I wish to speak with a Media Pre</li></ul>	
I YIELD my 3 minutes to the follo (Maximum 2 Yields per Speaker)	wing speaker:
(Name)	
Position on Agenda Item: In Favor Neutral	☐ Opposed

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11/-/-	PWolic
Date: 11/07/17	Agenda #:Couves 2
/	•
SPEAKER'S NAME:	es Loque
	(Print Name)
Address:	
Address:(Only required if follow-to	up mail response is requested)
City:	Zip:
Phone #: 760 -394 - 8500	Email:
l <b>AM:</b> ☑/The Applicant	☐ A Neighbor
<u> </u>	
Applicant's Representative	Other Interested Party
PLEASE INDICATE YOUR POSITION	ON RELOW:
	•
I wish to speak ☐ I DO NOT \     I wish to speak with a Media P	
I wisii to speak with a media P	resentation
I YIELD my 3 minutes to the fol (Maximum 2 Yields per Speaker)	lowing speaker:
(maximum z ricius per opeaner)	
(Name)	
(Name)	
Position on Agenda Item:	
In Favor	I Onnosed

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