

First Name *	Middle Name	Last Name *
Sarah		Dixon

Address*

Street Address

306 Harvest Bend Dr.

Address Line 2

City State / Province / Region

Wylie TX

Postal / Zip Code

75098

Email* **Phone Number**

sarahbeth.wren@gmail.com

Case #*

ZBA Case #2023-06 306 Harvest Bend

Response *

- I am FOR the requested zoning as explained on the public notice
- I am AGAINST the requested zoning as explained on the public

Comments

I agree and understand that by signing the electronic signature, that it is the equivalent to my manual/handwritten signature.

Signature *

Date of Signature

8/6/2023