

**CITY OF SAN BERNARDINO  
BOARD OF BUILDING COMMISSIONERS  
PUBLIC HEARING**

The City of San Bernardino Board of Building Commissioners welcomes public involvement in local government and invites your attendance at public hearings. Regular hearings begin at 9:00 a.m. on the first Thursday of each month.

The City of San Bernardino Code Enforcement Department prepares and issues agendas and staff reports for each regular hearing. Copies of the agenda are available for review at each hearing. Additional information on an agenda item may be obtained by calling (909) 384-5205.

At the start of each hearing, the Commission Chairman will explain the proceedings.

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**PROCEDURE FOR ADDRESSING THE  
CITY OF SAN BERNARDINO BOARD OF BUILDING COMMISSIONERS**

To assure the orderly conduct of business, the Commission requests that you follow these rules of procedure:

1. If you wish to speak on an agenda item, fill out the "Request to Speak" form attached to this sheet prior to commencement of the hearing. Please give completed forms to the Commission Secretary.
2. The Chairman will call upon you when it is your turn to speak. **Please state your name and address at the beginning of your statement.** All hearings are tape recorded for the record, so please speak into the microphone.
3. Please keep to the matter at hand, and make your comments as brief as possible, to avoid repetitious testimony.
4. Written comments will be accepted by the Commission and made part of the record. Please give statements to the Commission Secretary.

**\*\*\*\*\*PLEASE TURN OFF CELLULAR PHONES AND PAGERS\*\*\*\*\***

**CITY OF SAN BERNARDINO  
BOARD OF BUILDING COMMISSIONERS  
REQUEST TO SPEAK**

ITEM No. \_\_\_\_\_

DATE \_\_\_\_\_

REFERENCE ADDRESS: \_\_\_\_\_

Mr. \_\_\_\_\_

Ms. \_\_\_\_\_

Mrs. \_\_\_\_\_

**PLEASE PRINT**

\_\_\_\_\_  
(ADDRESS) (CITY) (STATE) (ZIP)

HOME PHONE: (\_\_\_\_) \_\_\_\_\_

WORK PHONE: (\_\_\_\_) \_\_\_\_\_

**PLEASE INDICATE HOW YOU ARE RELATED TO THIS PROPERTY:**

OWNER: \_\_\_\_\_

TENANT: \_\_\_\_\_

NEIGHBOR: \_\_\_\_\_

LANDLORD: \_\_\_\_\_

OTHER: \_\_\_\_\_ (PLEASE EXPLAIN) \_\_\_\_\_

**PLEASE GIVE THIS FORM TO THE COMMISSION SECRETARY WHEN COMPLETE  
AND PLEASE BE SEATED.**

**THE COMMISSION CHAIRMAN WILL CALL UPON YOU TO SPEAK AT THE  
APPROPRIATE TIME.**

**\*\*\*THANK YOU FOR YOUR COOPERATION\*\*\***