

PUBLIC COMMENT FORM

GWINNETT COUNTY COMMUNITY DEVELOPMENT PROGRAM

Proposed FFY 2020-2024 Consolidated Plan, Analysis of Impediments to Fair Housing Choice, and FFY 2020 Annual Action Plan

PUBLICATION DATE: SEPTEMBER 11, 2019 - PUBLISH IN: GWINNETT DAILY POST

PUBLIC COMMENT PERIOD: SEPTEMBER 11, 2019 – OCTOBER 11, 2019

Gwinnett County publishes for public comment its Proposed FFY 2020-2024 Consolidated Plan, Analysis of Impediments to Fair Housing Choice, and FFY 2020 Annual Action Plan, which will be considered for approval by the Gwinnett County Board of Commissioners on November 5, 2019.

Gwinnett County will hold Public Hearings to receive public comments on the Proposed FFY 2020-2024 Consolidated Plan, Analysis of Impediments to Fair Housing Choice, and FFY 2020 Annual Action Plan:

Public Hearing Locations	Address	Dates	Times
Gwinnett Justice and Administration Center 2 nd Floor, Conference Center, Room C	75 Langley Drive Lawrenceville, GA 30046	September 25, 2019	10:00 AM & 6:00 PM
Gwinnett Justice and Administration Center 2 nd Floor, Conference Center, Room A	75 Langley Drive Lawrenceville, GA 30046	October 2, 2019	10:00 AM & 6:00 PM

Comments will be received during the 30-day public comment period for the documents referenced above. A copy of the public comment form is available to download at www.gwinnettcounty.com. A summary of all comments received will be provided to the Gwinnett County Board of Commissioners before their action on November 5, 2019.

All comments must be received by email, hand delivery, or postal mail by 5:00 PM, October 11, 2019, at:

Gwinnett County Community Development Program
One Justice Square, 446 West Crogan Street, Suite 275, Lawrenceville, GA 30046-2439
Telephone: 678-518-6008; Fax: 678-518-6071; Email: CDBGHUDPlanning@gwinnettcounty.com

Please use this form for any comments shared. **Copy additional pages and attach as needed.**

Comments:

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Thank you for your comments.

Please Provide Your Name/Organization/Address/Telephone Number/Fax/Email: [Optional, but appreciated]

Name: _____

Organization Represented, If Any: _____

Mailing Address:

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email: info@papercity.com