

**City of Hollywood**  
**Properties, Facilities, Parks, Streets and Memorials**  
**Naming Application**

*Please type or clearly print all information*

Date of Application: 6/21/17

Applicant's Name: LINDA ANDERSON + LAURIE SCHECTER  
Address: 2334 FARAQUET ST 4500 N. SURF RD.  
HOLLYWOOD FL 33020 HOLLYWOOD FL 33019

Phone(s): 954-309-0151 954-923-6778  
Fax: 954-920-6321 LSchecter@pobox.com  
E-mail: LMarieAnderson57@gmail.com

Are you proposing:  
New name [  ] Name change [  ] Addition to existing designation [  ]

Location of proposed named site or memorial: \_\_\_\_\_

Current name: HOOD STREET

Proposed name: MACON (STREET) A STREET NAME JOSEPH YOUNG PURPOSED ON PLAT

Name of person/organization (nominee) to be recognized: ⊖

Nominee's Address: ⊖

Nominee's Home Phone: ⊖ Work: ⊖

Is there a public property, facility, park, street, etc. with such a name in Broward County?  
[  ] Yes, Please identify the location of public property or facility: \_\_\_\_\_

[  ] No.

Reason for the proposed name change/designation Reclaiming original Plat concept by Hollywood's founder

Nominee's contributions or accomplishments (attach additional pages if necessary):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If the proposed name change is for a public or private street, what neighborhood(s) will be impacted by the name change? \_\_\_\_\_  
\_\_\_\_\_

If the proposed name change is for a public or private street, ~~have you obtained the printed names, addresses, phone numbers, and signatures of abutting property owners indicating approval or disapproval of all abutting property owners is required, upon the receipt of a complete application, the City shall mail a ballot and a self-addressed stamped envelope to the record property owners whose property would be directly affected by the proposed name change. The proposed name change requires the approval of fifty percent (50%) plus one (1) of the property owners of record who return the ballots mailed out by the City.~~

~~[ ] Yes, Applicant has attached the required supporting documents.~~

~~[ ] No, Applicant shall obtain and submit the required supporting documents, if applicable, within thirty (30) days.~~

Please submit application to:  
City of Hollywood  
City Clerk  
P.O. Box 229045  
Hollywood, FL 33022

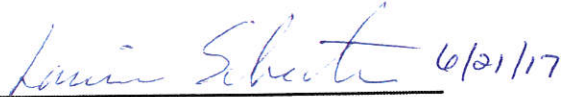
Non-refundable Application Fees:

Properties, Facilities and Parks	\$ 250.00
Memorials	\$ 100.00
Public and Private Streets	\$2,000.00

Please attach check made payable to: The City of Hollywood

The Applicant shall also bear all additional costs associated with the naming or renaming, including without limitation, the cost of City mailings, recording, and administration. A separate schedule of cost estimate shall be provided to the Applicant. Upon approval of the application, the application fee shall be applied toward the additional costs. Complete funding must be paid in full to the City, prior to the commencement of any work.

The City shall not be liable for any damage or loss. The Applicant releases and holds harmless the City, will not make a claim against or sue, and waives the right of recovery against the City and its officers, agents, or employees for damage or vandalism to or loss of the improvement/memorial arising out of a person's negligent or intentional act, or other act, however caused.

  
(Signature)

