

## **BOARD/COMMITTEE APPLICATION**

(Please attach additional sheets if you need more room or would like to include an optional resume) Name: Phone No.: \_\_\_\_\_ Email Address: Residence: Employer: Resident of Indiantown for: years - AND/OR - Business Owner in Indiantown for: yearsBoard/Committee(s) Applying For: Can you commit to attending year-round, monthly, evening meetings (circle one): Yes / No Please Explain Your Relevant Qualifications and the Reason You Wish to Serve on This Board/Committee: Do you now have, or in the past three years had, any business dealings with the Village? If so, please explain: Do you now have, or in the past three years had, any personal/business matters before the Board/Committee(s) you are applying for? If so, please explain:

**NOTE:** This application is considered a public record. It will be good for one (1) year from the date of application. If appointed to the Planning, Zoning and Appeal Board, THE STATE OF FLORIDA REQUIRES THAT YOU COMPLETE ITS FINANCIAL DISCLOSURE FORM, which becomes public record. Please attach additional pages if needed to fully answer any of the above questions. Completed forms can be returned to <a href="mailto:lmcbride@indiantownfl.gov">lmcbride@indiantownfl.gov</a> or PO Box 398, Indiantown, FL 34956. Applicants will be notified upon successful appointment. For questions, please call (772) 597-9900.

Date

Signature