



CITY OF FORT PIERCE

100 NORTH US HWY 1
FORT PIERCE, FLORIDA 34950
(772) 467-3066 FAX (772) 467-3841

APPLICATION FOR APPOINTMENT/REAPPOINTMENT

Name of Board or Boards for which you are applying: BEC CBAA

Name: <u>Edward Smith</u>		Phone: <u>561-452-8117</u>	
Home Address: <u>2708 Coral Reef Dr</u>		How long at this address? <u>4.</u>	
City/Zip Code: <u>Orlando FL 32826</u>			
Are you a citizen of the United States?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Occupation: <u>ELECTRICIAN</u>			
Do you own a business that operates within the City of Fort Pierce?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, list the address and nature of said business: <u>E. SMITH ELECTRICAL SERVICES LLC</u> <u>ELECTRICAL CONTRACTING 2708 CORAL REEF</u>			
Do you now or in the future plan to do business with the City of Fort Pierce?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, in what capacity? <u>ELECTRICAL SERVICES</u>			
Are you employed by a business that is located within the City of Fort Pierce?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, state the business and location:			
Do you have special training or knowledge in the area of:			
Architecture: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Engineering: <input type="checkbox"/> Yes <input type="checkbox"/> No Real Estate Brokering: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Contracting: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Land Development: <input type="checkbox"/> Yes <input type="checkbox"/> No Other:			
Describe your education, background, training and knowledge in the above area(s): <u>OPERATING AS AN ELECTRICAL CONTRACTOR</u>			
Are you currently a member of a Commission-appointed board/committee?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, please specify:			
Have you ever been convicted of a felony?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, what was the nature of the crime(s) you were convicted of:			
Referred by:		Applicant Email Address: <u>E.SMITHSERVICES@GMAIL.COM</u>	
Date: <u>1/09/18</u>		Applicant's Signature <u>[Signature]</u>	

APPLICATIONS EXPIRE 6 MONTHS FROM THE DATE OF SUBMISSION. PLEASE REAPPLY AS OFTEN AS DESIRED.

Please return form to: City Clerk's Office – 100 North US Hwy 1, Fort Pierce, Florida 34950

fax (772) 467-3841 or via email at lcox@city-ftpierce.com