




# CITY OF FORT PIERCE

100 NORTH US HWY 1  
FORT PIERCE, FLORIDA 34950  
(772) 467-3065 FAX (772) 467-3841

## APPLICATION FOR APPOINTMENT/REAPPOINTMENT

### Planning Board

Name of Board or Boards for which you are applying: \_\_\_\_\_

Name: Steven Tarr		Phone: 561-762-3732	
Home Address: 316 S. Ocean Dr.		City/Zip Code: _____	
How long at this address? 3 years			
Are you a citizen of the United States? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Occupation: Real Estate Broker/Owner/Developer			
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: Real Estate Brokerage Real Estate Development Real Estate Investment			
Do you now or in the future plan to do business with the City of Fort Pierce? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, in what capacity? I would not do business that may create any conflict of interest.			
Are you employed by a business that is located within the City of Fort Pierce? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, state the business and location: See above.			
Do you have special training or knowledge in the area of:			
Architecture: <input type="checkbox"/> Yes <input type="checkbox"/> No		Engineering: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Contracting: <input type="checkbox"/> Yes <input type="checkbox"/> No		Land Development: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Real Estate Brokering: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Other: _____	
Describe your education, background, training and knowledge – (feel free to attach a resume): Masters Degree in Real Estate and Finance. Former Planning Board Commissioner in City of PB Gardens. 20 years of development experience in Fort Pierce.			
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: Pat Murphy		Applicant Email Address: hovenre@gmail.com	
Date: 10-21-2020	Applicant's Signature 		

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@cityoffortpierce.com