



# CITY OF FORT PIERCE

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

## APPLICATION FOR APPOINTMENT/REAPPOINTMENT TO FPUA

(City Residency Required)

Name: James Harding	Phone: 804-761-0667
Home Address: 66 Winghaven Ln City/Zip Code: Ft. Pierce, FL 34949	How long at this address? 13 years
Are you a qualified elector of the City of Fort Pierce? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Occupation: Retired	Employer Name:
Do you own a business that operates within the City of Fort Pierce? If yes, list the address and nature of said business: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Do you now or in the future plan to do business with or have a business relationship with FPUA? If yes, please describe in detail outlining any businesses or matters deemed appropriate. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Describe your professional background and what expertise you will bring to the FPUA Board. Feel free to attach your curriculum vitae (CV) or other applicable information. Manager of large Communities and properties	
Do you have special training or knowledge in any of the following areas: Utilities: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    Engineering: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    Contracting/Development: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Legal: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    Management: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    Finance/Accounting: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Describe your education and background in any of the above areas: BS in Engineering; MBA (finance) Harvard Business School; Chief Administrator for International Organization with 600 employees and annual budget over \$150 Million	
Are you currently a member of a Commission-appointed board or committee? If yes, please specify: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Have you ever been convicted of a felony? If yes, what was the nature of the crime(s) you were convicted of: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If appointed, are you willing to attend a training session which could last at least 5 hours? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Referred by: South Beach Association	Applicant Email Address: jim.millcreek@earthlink.net
Date: 5 Aug 2001	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@city-ftpierce.com