

Print

Application For Appointment/Reappointment - Submission #24865

Date Submitted: 7/2/2026

Name of Board or Boards for which you are applying:*

Communitywide Council Advisory Board

Name:*

Erin O'Brien

Home Address:*

708 S. 9th Street

City:*

Fort Pierce

State:*

FL

Zip:*

34950

How long at this address?*

4

Telephone Number*

954-667-4976

If less than two years, provide prior address:

☐ Are you a citizen of the United States? *





Yes



No

Occupation: *

Project Manager

Employer:*

Remnant Construction, LLC

Do you own a business that operates within the City of Fort Pierce?*



Yes



No

If yes, list the address and nature of said business:

Do you now or in the future plan to do business with the City of Fort Pierce or the Fort Pierce Utilities Authority(FPUA)?*



Yes

☐

No

If yes, in which organization and in what capacity?

Possibly a contract for construction

Are you employed by a business that is located within the City of Fort Pierce?*

☒

Yes

☐

No

If yes, state the business and location:

Remnant Construction, LLC at 201 S. 2nd St #100

Do you have special training or knowledge in the area of:

Engineering:*

☒

Yes

☐

No

Architecture:*

☒

Yes

☐

No

Real Estate
Brokering:*

☐

Yes

☒

Finanace/Accounting:*

☐

Yes

☒

No

		No	
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Contracting:*

☒

Yes

☐

No

Land Development:*

☒

Yes

☐

No

Utilities:

☒

Yes

☐

No

Management:*

☒

Yes

☐

No

Describe your professional background and what expertise you will bring to this Board. (Attach your resume or other applicable information below if desired) *

I have a Bachelor's degree in Civil Engineering and 20+ years experience in the construction industry.

Are you currently a member of a Commission-appointed board/committee?*

☒

Yes

☐

No

If yes, please specify:

AHAC

Have you ever been convicted of a felony?*

☐

Yes



No

If yes, what was the nature of the crime(s) you were convicted of:

If appointed, are you willing to attend a training session which could last several hours?*



Yes



No

Referred by:*

Applicant Email Address:*

Date:*

Applicant's Signature:*

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

For additional information, please contact the City Clerk's Office at 772.467.3065 or email lcox@cityoffortpierce.com.

Upload Resume (Optional)

Choose File

No file chosen