

Print

Application For Appointment/Reappointment - Submission #24859

Date Submitted: 6/30/2026

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

Planning Board

Name:*

Anton Kreisl

Home Address:*

3004 Fairway Dr.

City:*

Fort Pierce

State:*

FL

Zip:*

34982

How long at this address?*

4 Years

Telephone Number*

760-616-1299

If less than two years, provide prior address:

☐ Are you a citizen of the United States? *





Yes



No

Occupation: *

Engineer

Employer:*

CMTA/Legence

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?

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



Yes



No

If yes, state the business and location:

CMTA 181 Melody Lane Fort Pierce FL 34950

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

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) *

Over 10 years in the field of Engineering, Building design and project management.

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

☒

Yes

☐

No

If yes, please specify:

Fort Pierce Planning Board, Chairman

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 lcov@cityoffortpierce.com.

Upload Resume (Optional)

Choose File

No file chosen