

CITY OF INVERNESS

212 W. MAIN STREET • INVERNESS • FLORIDA 34450 352-726-2611 DDS@INVERNESS.GOV

APPLICATION FOR APPOINTMENT TO CITY BOARDS/COMMISSIONS

PLEASE INDICATE WHICH BOARD/COMMITTEE YOU WOULD LIKE TO SERVE:

□ Planning & Zoning Commission □ Inverness Community Redevelopment Agency		☐ Architectural Aesthetic Review Committee☐ Zoning Board of Adjustment	
Please provide the following information:			
Name		Email	
Mailing Address			
Physical Address			
Phone #	Cell #	Work #	
Employer:	Employer Address:		
Please provide any background information considering your application (A resume may		personal, educational, civic) that might be useful in d in lieu of this information).	
Are you a citizen of the City of Inverness?	Yes O No	o If so, how long?	
What additional board/commissions have yo	u served in	the past?	
		s with the City of Inverness that may present a bw is there a conflict of interest?	
When completed and filed with the City, the Statutes , and opened to public inspection because of the complete of the complet		t is a public record under Chapter 119, Florida on.	
Applicants Signature:		Date:	

Return completed form:

Email: DDS@inverness.gov or mail/drop off: 212 W. Main Street, Inverness.