



**APPLICATION TO SERVE ON THE
LEE COUNTY VALUE ADJUSTMENT BOARD**
(PLEASE TYPE OR PRINT)

The citizen appointed by the Board of County Commissioners to the Lee County Value Adjustment Board must meet all of the following statutory requirements:

1. Must own homestead property within Lee County
2. May not be a member or employee of any taxing authority
3. May not be a person who represents property owners in any administrative or judicial review of property taxes.

Mr/Mrs/Ms:			
Name:	Last	First	Middle Initial
Residence Address:			
Street	City	Zip Code	
Parcel Strap No.			
Business Address:			
Street	City	Zip Code	
Mailing Address:			
Street	City	Zip Code	
Phone No.			
Home		Business	
FAX:			
E-Mail Address:			

Occupation: _____

My qualifications to be eligible are as follows:

Civic/Professional Accomplishments/Offices Held

If applicable, please indicate any employment, contractual relationship or status that you may have, or have had within the past 12 months, with any private business entity that rents, leases or sells any realty, or provides any goods or services to the County or that is conducting any business with the County.

Are you a member or employee of any taxing authority or an advisory committee member to any taxing authority in the State of Florida? If so, please list the name(s) of the taxing authority or advisory committee:

Do you represent property owners in any administrative or judicial review of property taxes? Yes No

Do you presently or have you ever worked for the Lee County Board of County Commissioners? Yes No

➤ If "Yes", please list position, department, start and end date: _____

Do you have any relatives currently working for the Lee County Board of County Commissioners: Yes No

➤ If "Yes", please list name(s) and department(s): _____

If applicable, attach a résumé of additional personal and professional qualifications and experience that pertains to the above.

I hereby submit my name for consideration to serve as the Board of County Commissioner's citizen appointment to the Lee County Value Adjustment Board and do hereby acknowledge that I have read and understand the statutory requirements listed above for serving as the Board of County Commissioners citizen appointment to the Lee County Value Adjustment Board. I am attesting that I meet all of these requirements. I acknowledge that if it is determined that I do not meet these requirements, my application will not be considered. I understand that if I am appointed by the Lee County Board of County Commissioners to serve as the citizen appointment to the Lee County Value Adjustment Board, I serve at the pleasure of the Lee County Board of County Commissioners and may be removed from this appointment for failure to comply with the statutory requirements or at the pleasure of the Board of County Commissioners.

Signature

Date

- 1.) **Some of the Boards and Committees appointed by the Board of County Commissioners are required to comply with Chapter 112, Florida Statutes, the Financial Disclosure Law and you may be required to file a Form 1 Financial Disclosure.**
- 2.) **Lee County, an equal opportunity/affirmative action employer, considers the selection and appointment of persons to advisory committees in a non-discriminatory manner consistent with the requirements of Federal, State and Local non-discrimination laws.**

**PLEASE RETURN THIS COMPLETED FORM TO: LEE COUNTY PUBLIC RESOURCES
VALUE ADJUSTMENT BOARD
P.O. BOX 398
FORT MYERS, FL 33902-0398**



Committee ID# _____
(Office Use Only)

Lee County complies with Local State and Federal laws, regulations and guidelines that prohibit discrimination based on race, sex, color, national origin, handicap, age or marital status

STATUTORILY CREATED REQUIRED COMMITTEE REPORTING DATA

Lee County is required by the State of Florida to collect and maintain the information requested below for statistical reporting purposes only. This information will be maintained separately from your application and will not be considered in the application evaluation process.

The information provided is required by State Statute, however, you have the right not to disclose any or all of this information. This form must be returned to Lee County Public Resources Office.

Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Choose Not to Disclose
Handicapped/Disabled	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Choose Not to Disclose

If you have require special assistance or accommodations, please contact the EEO Office @ 239.335.2221

If special accommodations are required, please specify:

+++++
RACIAL/ETHNIC DATA (CHECK ONE)

- WHITE: (Not of Hispanic Origin):** All persons having origins in any of the original people of Europe, North Africa or the Middle East.
- BLACK: (Not of Hispanic Origin):** All persons having origins in any of the Black racial groups of Africa.
- ASIAN OR PACIFIC ISLANDER:** All persons having origins in any of the original Peoples of the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands. This area includes, for example: China, Japan, Korea, the Philippine Islands and Samoa.
- AMERICAN INDIAN OR ALASKAN NATIVE:** All persons having origins in any of the original Peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.
- HISPANIC:** All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin regardless of race.
- CHOOSE NOT TO DISCLOSE**