

CITY OF MARGATE APPLICATION FOR BOARD/COMMITTEE APPOINTMENT

Name: _	Chad	Dangervil	Date: 6 // /5	
Address	s: _		magate (1. 33065	
Please o	check all Boa	ards/Committees for w	vhich vou wish to be considered.	
Per Sec file a Fir	tion 112.314 nancial Discl	5 Florida Statutes, me osure Report upon app	embers of the following Boards are required to pointment, and then annually:	
P	lanning & Zo	oning Board	Board of Adjustment	
The follo	owing Boards the City Cler	s have specific require k's Office for more det	ements for appointment consideration. Please tails:	
E A	ffordable Ho ivil Service E	using Advisory Board	Unsafe Structures Board Other: ANY Hing open	
All applicants must reside in Margate at least six (6) months prior to the date of appointment. How long have you lived in the City of Margate? 1045 (for proof of residency for the past six (6) months, please attach to this application a copy of your valid State of Florida driver's license or other legally-issued I.D., AND either a copy of your Broward County Voter Registration card or copies of your water or electric bills for the last 6 months.)				
Contact (Email ad	number: (Da dress:	y and Evening):		
Education	<u>on</u>			
Do you p If no, do	ossess a hig you possess	gh school diploma? _\ an equivalent certific	ation, such as a GED?	
College	Education			
Name of	College/Univ	Dates Attended	Major/Minor Degree Earned Major/Minor Degree Earned Major/Minor Degree Earned Major/Minor Degree Earned	

Vocational & Technical Education Name of School/Agency Dates Attended Coursework Certification Earned 1107-09 business Admin. HIU <u>Civic/Volunteer Experience/Education</u> – Please list all civic involvement, volunteer experiences, or other ways you've provided assistance or support to the community. conditerskills with miterosoft (wd exoch towerp-int book keeping filing; Aprit management - project manager **Employment History** Beginning with your present or most recent employment, please describe ALL periods of employment including self-employment, unemployment periods, and military service. Please use an additional sheet if necessary. Name of current or most recent employer: LSV Entropyses Phone: 4-877 255-4433 Address (street, city, state, zip code): 14750 NW 77cf Mlami labs. Start and end dates: 1/2010 - present Title: Director of SAles/mk Job duties: Operations manager Reason you left the employer: Name of employer: _____ Phone: ____ Address (street, city, state, zip code): Start and end dates: _____ Title: ____ Job duties: _____

Reason you left the employer:	
Name of employer:	Phone:
	Title:
Job duties:	
Reason you left the employer:	
Supplemental Questions	
Are you aware of any potential conflict(s) a City Board/Committee? Yes	of interest that may arise from your serving on
If yes, please explain:	
Do you have any monies owed to the City Yes No	of Margate that are delinquent?
If yes, please explain:	
Do you have any pending code violations of Margate? Yes No	relating to property owned by you in the City
If yes, please explain:	
Do you have any violations relating to other	er City Codes? Yes 🔲 No 💆
If yes, please explain:	

Have you ever been convicted of a crime, excluding minor traffic offer Yes No	enses?
If yes, please provide the details for all such instances:	
Have you ever run for or held public office? Yes No	
If yes, please provide the dates, and position(s):	
Do you own any businesses? Yes No No	
If yes, please name the business(es) and in what City they are located many of many of	diakes
Have you attended Margate Community College? Yes No	
How many City of Margate Board/Committee meetings or City Commhave you attended in the past 3 years?	ission meetings
<u>Certification</u> : I certify that all statements and information that I ha application are true, complete, and correct to the best of my knowled are made in good faith.	ve provided in this dge and belief, and
I further certify that I am both willing and able to make the commitment, including personal attendance at board/committee meet applicable functions believed necessary to function as an effective Board/Committee.	lings and any other
Mary Any	6-11-15
Signature	Date



CITY OF MARGATE APPLICATION FOR BOARD/COMMITTEE APPOINTMENT

NAME: Chad Dangervil

ADDENDUM TO PREVIOUS APPLICATION

Briefly describe any specific expertise and/or abilities that would pertain to your service on a City Board or Committee:

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							fraternal
Organ.		1					

<u>Certification</u>: I certify that all statements and information that I have provided in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

I further certify that I am both willing and able to make the considerable time commitment, including personal attendance at board/committee meetings and any other applicable functions believed necessary to function as an effective member of a City Board/Committee.

Signature

Date

APR 2 1 2014

A C C I WE F



CITY OF MARGATE APPLICATION FOR BOARD/COMMITTEE APPOINTMENT

Name: Joy Downey Date: 4-15-14
Address:
(. tambér 54 55 51), <u>Elp</u>
Please check all Boards/Committees for which you wish to be considered.
Charter Review Board
Per Section 112.3145 Florida Statutes, members of the following Boards are required to file a Financial Disclosure Report upon appointment, and then annually:
☐ Planning & Zoning Board ☐ Board of Adjustment
The following Boards have specific requirements for appointment consideration. Please contact the City Clerk's Office for more details:
Affordable Housing Advisory Unsafe Structures Board Civil Service Board
All applicants must reside in Margate at least six (6) months prior to the date of appointment. How long have you lived in the City of Margate?
Contact number: (Day and Evening): Email address:
Education
Do you possess a high school diploma? $\sqrt{\ell}$ S If no, do you possess an equivalent certification, such as a GED?
College Education
Name of College/Univ. Dates Attended Bacry Univ. 2003-2005 Broward Com. College 1990-2000 Broward Com. College 1990 2000 ASSOC. in Fire Science yes

Vocational & Technical Education		
	oursework refighting	Certification Earned State Certified Frefighter
Civic/Volunteer Experience/Education - Please experiences, or other ways you've provided assistated to lunteer at Liberty Elementary S	ance or support to	o the community.
Employment History		
Beginning with your present or most recent employed of employment including self-employment, unemp Please use an additional sheet if necessary.	oyment, please d loyment periods,	describe ALL periods and military service.
Name of current or most recent employer: City of	•	
Address (street, city, state, zip code): 1811 B	anks Roa	d, margate, FL3306
Start and end dates: Aug 2000 - present Titl	e: <u>Lieutena</u>	nt
Job duties: <u>Supervisor</u> of employees, s care of the citizens.	Firefighting	and medical
Reason you left the employer: presently	employed	
Name of employer: City of Lauderdale	La Kes Phone:	
Address (street, city, state, zip code): 4360 NW	J 36 St, Lan	ud LKS, FL 33319
Start and end dates: May 1994 - Aug 200 OTitle	e: <u>Paramed</u>	ic / Firefighter
Job duties: Firefighting and medical of Laudurdale Lakes.	care of t	he citizens
Reason you left the employer: job opport	unities	
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Name of employer: AMR	Phone:
Address (street, city, state, zip code): 5551 Nw	9 Ave FtLaud 33300
Start and end dates: Jan 91 - April 94 Title:	field Training Officer
Job duties: <u>Paramedic</u> training of new patients to and from hospitals.	•
Reason you left the employer: employment	- opportunity
Supplemental Questions	2
Are you aware of any potential conflict(s) of interest that a City Board/Committee? Yes No	at may arise from your serving on
If yes, please explain:	
-	
Do you have any monies owed to the City of Margate t Yes No V If yes, please explain:	hat are delinquent?
Do you have any pending code violations relating to proof Margate? Yes No	operty owned by you in the City
If yes, please explain:	
	·
Do you have any violations relating to other City Codes	s? Yes 🗌 No 🗹
If yes, please explain:	
Page 3 of 6	

Have you ever been convicted of a crime, excluding minor traffic offenses? Yes No No
If yes, please provide the details for all such instances:
Have you ever run for or held hold public office? Yes \(\square\) No \(\square\)
If yes, please provide the dates, and position(s):
Do you own any businesses? Yes No V
If yes, please name the business(es) and in what City they are located:
Have you attended Margate Community College? Yes No
How many City of Margate Board/Committee meetings or City Commission meetings have you attended in the past 3 years?

Written Request In your own words, please provide the knowledge, skills and abilities, you possess that would be beneficial to a Charter Review Board. Also please tell us what the City Charter is, and why there should be a review of the City Charter. Please keep your response to the space provided.

<u>Certification</u>: I certify that all statements and information that I have provided in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

I further certify that I am both willing and able to make the considerable time commitment, including personal attendance at board/committee meetings and any other applicable functions believed necessary to function as an effective member of a City Board/Committee.

Signature

4-15-14

Date

CITY OF MARGATE, FLORIDA APPLICATION FOR BOARD/COMMITTEE APPOINT

Please check Boards/Committees for which you wish to be considered:

NOV 1 2 2014

Your Service to Our City is Earnestly Solicited

Service on a Board or Committee provides citizens with an opportunity to help shape policy and direction for the City of Margate. Residents are invited to apply for appointment by the City Commission to a Board or Committee. All applicants, unless specifically noted, must reside in Margate at least six months from date of appointment. Applicants may be considered for more than one Board, but will only be permitted to serve on one Board at a time.

Board of Adjustment* Civil Service Board	□ Planning & Zoning Board * □ Unsafe Structures Board**
*Per Section 112.3144 Florida Statutes, members of Boards a ** Specific requirements for appointment consideration. Pleas	are required to file a Financial Disclosure Report. se contact City Clerk's Office.
Please type or print information:	
PERSONAL: HOW LONG HAVE YOU BEEN A RES	To the state of th
Name: <u>Clifford Frederic</u>	Home Phone #
Address: _	Alternate #
Subdivision Name: _	
EMPLOYMENT:	
Current or Last Employer: Broward Sheriff's	Office
Address:	
Position: <u>Defention</u> Deputy	Years of Service: Over 7 yrs.
Duties:	
EDUCATION:	
High School: Ely Lo	cation: Pompono Beach
College: Florida Atlantic University Lo	cation: Boca Raton
High School: Ely Lo College: Florida Atlantic University Lo Years Completed: 2012 (4) De	egree: Political Science & Inner Disciplinan
Field of Study: Politics, History, and Sociology	
0/	

Other professional or technical training (name of school, course names, etc.):
2013 andusted of Margate Community College, which I attended with
City Commissioner Tommy Ruzzano
MEMBERSHIPS:
Completion of this section is optional.
Organization (within City of Margate) Years of Membership Offices Held (if any)
Organization (outside City)
OTHER QUALIFICATIONS:
Briefly describe any specific expertise and/or abilities that would pertain to your service on a City Board or Committee:
Being a Deputy for B.S.O. I have learned not to be bins towards
any situation or anyone, make fair decisions, and life experiences
have faught me to make humananitarian decisions. In also bilingua
ACKNOWLEDGMENT:
I understand that, in accordance with the Florida Sunshine Law, this information will be posted for public review and I waive any objection to such publication.
I understand that appointment to any of the positions indicated above is a voluntary service and not compensated.
If appointed, I agree to faithfully and fully perform the duties of my office, will make every endeavor to serve my full term, and will comply with all laws or ordinances of the City, County, and State of Florida, particularly those pertaining to the conduct of public office and the financial disclosure requirements, if applicable to my position. I further agree to take the statutory oath. I understand that, if appointed, I must take the oath of office prescribed in the Florida Statutes.
Signature of Applicant Date

PLEASE RETURN THIS APPLICATION TO THE CITY CLERK'S OFFICE FOR PROCESSING

City of Margate, 5790 Margate Boulevard, Margate, Florida 33063 (954) 972-6454 Fax (954) 935-5211

board application.doc July 2006