

CITY OF MARGATE APPLICATION FOR BOARD/COMMITTEE APPOINTMENT

Name: FREDERIUK SOH WEITUM Date: 3-11-19
Address: TOO N/N/ 9 AVE 33067 (Number/Street/City/Zip)
Please check all Boards/Committees for which you wish to be considered.
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 Civil Service Board Unsafe Structures 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? (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 number: (Day and Evening): <u>954 973 04549954790</u> 9W Email address: <u>\$W#W&77ZER E ADL, COMM</u>
Education
Do you possess a high school diploma? (Left) f no, do you possess an equivalent certification, such as a GED?
College Education
Name of College/Univ. Dates Attended Major/Minor Degree Earned

Vocational & Technical Educ	<u>ation</u>		
Name of School/Agency Date	es Attended	Coursework	Certification Earned
Civic/Volunteer Experience/E			
experiences, or other ways you	live provided a	issistance of suppo	it to the community.
BOY SCHUTT	236		
BOKKD ADSU	97 N 6	1195 5 CLVB	
Employment History			
Beginning with your present of employment including self-e Please use an additional sheet	mployment, ui	nemployment perio	ds, and military service.
Name of current or most recent	t employer:		Phone:
Address (street, city, state, zip	code):		
Start and end dates:		_ Title:	
Job duties:			
Reason you left the employer:			
Name of employer:		Pho	ne:
Address (street, city, state, zip	code):		
Start and end dates:			
Job duties:			
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:	
Supplemental Questions	
Are you aware of any potential conflict(s) of in a City Board/Committee? Yes No	
If yes, please explain:	
Do you have any monies owed to the City of N	Margate that are delinquent?
If yes, please explain:	
Do you have any pending code violations related Margate? Yes No No	ting to property owned by you in the City
If yes, please explain:	
Do you have any violations relating to other C	ity Codes? Yes No
If yes, please explain:	,

Have you ever been convicted of a crime, excluding minor traffic offenses Yes No	?
If yes, please provide the details for all such instances:	
Have you ever run for or held public office?	
If yes, please provide the dates, and position(s):	
Do you own any businesses? Yes No	
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 have you attended in the past 3 years?	n meetings
Briefly describe any specific expertise and/or abilities that would pertain to a City Board or Committee:	to your service
Certification: I certify that all statements and information that I have p application are true, complete, and correct to the best of my knowledge are made in good faith.	
I further certify that I am both willing and able to make the conscommitment, including personal attendance at board/committee meetings applicable functions believed necessary to function as an effective menuity of the committee.	and any other
SHANN BERUM	3-11-19
Signature /	Date '/

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