



**APPLICATION TO SERVE ON THE
CHARLOTTE COUNTY INDUSTRIAL DEVELOPMENT AUTHORITY
(IDA)**

New Applicant

Re-Appointment

INCOMPLETE APPLICATIONS WILL BE RETURNED

Mr/Mrs/Ms:			
Name:	Last	First	Middle Initial
	COALWELL	JAMES	M
Residence Address:			
4153 RIVER BANK WAY, PORT CHARLOTTE, FL 33980			
Street	City	Zip Code	
		SAME	
Mailing Address:			
Street	City	Zip Code	
Phone No.			
Home		Business	
FAX:			
E-Mail Address: jcoalwell@gmail.com			

Occupation: BANKING

If currently retired, previous occupation: _____

Civic/Professional Accomplishments/Offices Held:

SAME AS BEFORE

APPLICATION TO SERVE ON THE
CHARLOTTE COUNTY IDA - CONTINUED

My qualifications to be eligible are as follows:

UNCHANGED

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.

NA

Is this application for a new appointment? Yes No

If yes, please indicate what you would like to accomplish if you are appointed to the IDA:

Is this application for a re-appointment? Yes No

> If "Yes", please indicate what your accomplishments have been while serving on this Committee:

Attended all meetings and performed board duties as expected.

> If "Yes", please indicate what you would like to accomplish during this term:

CONTINUE OUR CURRENT OBJECTIVES. ~~AND~~ CONTINUE TO BUILD toward future advancement for the Economic development of Charlotte County.

If you have previously served on a Charlotte County Advisory Committee or are currently serving and seeking reappointment, please indicate the number and general nature of any voting conflict disclosure memorandum filed (Form 8B) while serving on the committee:

NA

Have you ever worked for the Charlotte County Board of County Commissioners? Yes No

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

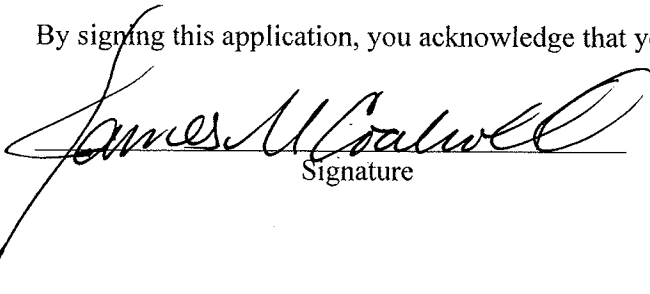
Do you have any relatives currently working for the Charlotte County Board of County Commissioners? Yes No

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

**APPLICATION TO SERVE THE
CHARLOTTE COUNTY IDA – CONTINUED**

- 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.) Charlotte 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.
- 3.) The Board of County Commissioners request that you attend the Commission meeting at which your application will be considered for appointment. This office will notify you of the Commission meeting date.
- 4.) Members who fail to attend three (3) meetings in a twelve-month period without cause and without prior approval of the chairman shall automatically forfeit their appointment.

By signing this application, you acknowledge that you have read and understand the previous statements.


Signature

5/15/26
Date

PLEASE RETURN THIS COMPLETED FORM TO:

**CHARLOTTE COUNTY ECONOMIC DEVELOPMENT OFFICE
18501 MURDOCK CIRCLE, #601 300
PORT CHARLOTTE, FL 33948**

It is recommended that a résumé of additional personal and professional qualifications and experience that pertains to the above be submitted with this application however, it cannot replace the application form.

