



CHARLOTTE COUNTY
FLORIDA

**APPLICATION TO SERVE ON A
CHARLOTTE COUNTY ADVISORY BOARD**

INCOMPLETE APPLICATIONS WILL BE RETURNED

Mr/Mrs/Ms:			
Name:	Last	First	Middle Initial
	HAIR	DONALD	R
Residence Address:			
2402 RISKEN TERR FORT CHARLOTTE 33981			
Street	City		Zip Code
Mailing Address:			
2402 RISKEN TERR FORT CHARLOTTE 33981			
Street	City		Zip Code
Phone No.	757-652-8976 (cell)		
	Home	Business	
FAX:	N/A		
E-Mail Address:	donohair@verizon.net		

I hereby submit my name for consideration to serve in an advisory capacity to the Board of Charlotte County Commissioners on the following Advisory Board:

GULF COAST WATERWAY MAINTENANCE BENEFIT UNIT
Name of Advisory Board

If applying for a specific category/position, please so state: Advisory Board Member

Occupation: RETIRED

If currently retired, previous occupation: MECHANICAL ENGINEER

Civic/Professional Accomplishments/Offices Held:

30 PLUS YEARS - CONSTRUCTION MANAGEMENT / PROJECT MANAGER
15 PLUS YEARS - PROJECT DESIGN ENGINEER
USCG 100 TON MASTER (RETIRED)

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In order to qualify a volunteer must both be a property owner within and reside within the Unit, and my qualifications to be eligible are as follows:

OWN AND RESIDE IN GULF CODE

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.

NONE

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): _____

Are you a full-time Charlotte County Resident? Yes No

Have you ever been convicted of a Felony or Misdemeanor? (Please be sure you understand the question, as failure to answer truthfully will disqualify you). Yes No

Have you ever pled NO LO CONTENDRE or pled guilty to a crime which is a Felony or a Misdemeanor? (Please be sure you understand the question, as failure to answer truthfully will disqualify you). Yes No

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- 1.) All of the Boards and Committees appointed by the Board of County Commissioners are required to comply with the Sunshine Law FS 286.011 and 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. You may be required to file a Form 1 Financial Disclosure. You will be provided with more information upon appointment.
- 2.) Charlotte County, an equal opportunity/affirmative action employer, considers the selection and appointment of persons to advisory boards 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 two (2) meetings in a rolling twelve-month period shall automatically forfeit their appointment.

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



Signature

01 - 28 - 2024

Date

A résumé or list of qualifications and experience is requested but cannot replace this application form.

PLEASE RETURN THIS COMPLETED FORM TO:

Charlotte County Public Works
Municipal Service District Representatives
7000 Florida Street
Punta Gorda, FL 33950

OR EMAIL TO:

MSBU-TU@CharlotteCountyFl.gov