



Value Adjustment Board Application

(Please Type or Print)

The citizen appointed by the Lee County 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, Florida
2. May not be a member or employee of any taxing authority
3. May not be a person who represents property owners, property appraisers, tax collectors or taxing authorities in any administrative or judicial review of property taxes.

Personal Information

Title: Mr. Mrs. Ms. Other:

Name:

Last	First	Middle Initial
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Home Address:

Street	City	Zip Code
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Parcel STRAP No.:

Business Address:

Street	City	Zip Code
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Mailing Address:

Street	City	Zip Code
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Phone:

Home	Cell	Business
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Fax:

E-mail Address:

Occupation:

My qualifications to be eligible are as follows:



Value Adjustment Board Application

(Continued)

Civic / Professional Accomplishments / Offices Held

If applicable, 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, list the name(s) of the taxing authority or advisory committee:

Do you represent property owners, property appraisers, tax collectors or taxing authorities in any administrative or judicial review of property taxes? Yes No

Have you ever worked for the Lee County Board of County Commissioners? If 'Yes', list position, department, start & end date. Yes No

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Do you have any relatives currently working for the Lee County Board of County Commissioners? If 'Yes', list name(s) & department(s). Yes No

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If applicable, attach a resume of additional personal and professional qualifications and experience.

I hereby submit my name for consideration to serve as the Board of County Commissioners' citizen appointment to the Lee County Value Adjustment Board and do hereby acknowledge that I have read and understand the statutory requirements listed 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

Lee County Administration | 2115 Second Street | Fort Myers, FL
Phone: (239) 533-2221 | Email: advisorycommittees@leegov.com

Please be advised that all information contained in this application becomes Public Record once submitted to Lee County

- Some Boards and Committees appointed by the Lee County Board of County Commissioners are required to comply with Chapter 112, Florida Statutes, Financial Disclosure Law, and you may be required to file a Form 1 Statement of Financial Interests.
- Lee County, an Equal Opportunity 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.

Return completed form:

Lee County Administration
Value Adjustment Board
P.O. Box 398
Fort Myers, FL 33902-0398



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Committee ID# _____

(Office Use Only)

Lee County complies with Federal, State and Local 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 Administration.

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 Note to Disclose

RACIAL / ETHNIC DATA (CHECK ONE)

<input type="checkbox"/>	WHITE (Not of Hispanic Origin): All persons having origins in any of the original people of Europe, North Africa or the Middle East.
<input type="checkbox"/>	BLACK (Not of Hispanic Origin): All persons having origins in any of the Black racial groups of Africa.
<input type="checkbox"/>	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
<input type="checkbox"/>	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.
<input type="checkbox"/>	HISPANIC: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin regardless of race.
<input type="checkbox"/>	CHOOSE NOT TO DISCLOSE

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