



CITY OF BELLEAIR BEACH

City Council Vacancy Application

(Please **print** clearly)

Name: _____

Address: _____

Home Phone: _____ **Cell Phone:** _____

Email: _____

Length of Residency in Belleair Beach: _____

Are you registered to vote in Belleair Beach? _____

Voter Registration Date: _____

Reason you are interested in serving:

Community activities/involvement:

Applicable education, occupational, and specialized experience:

City Council Vacancy Application

Council members make recommendations and decisions that affect the entire community.

1.) Do you foresee possible conflicts of interest with any of your current employment or civic positions? Yes (Please explain) No

2.) When making recommendations and decisions do you feel you could be impartial and base your decision on the overall need and benefit of the Community? Yes No (Please explain)

Have you represented any other private person, group or entity for compensation before the City Council or any board/committee of the City within the last two years? _____

Do you, your spouse, or your employer have any financial interest, directly or indirectly, in any contracts with the City? _____

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Are there any days or evenings you are unavailable to meet?

Yes (*Please explain*) No

I hereby apply for appointment to the vacant City Council seat and file this statement of candidacy. I declare that I meet all requirements to hold said office and that I agree to serve if appointed.

Signature: _____

Date: _____

Received by: _____

Date: _____

Please Note: Any information given on this application is subject to the Public Records Law of Florida

**APPLICATIONS MUST BE SUBMITTED TO THE
OFFICE OF THE CITY CLERK NO LATER THAN
3:30PM SEPTEMBER 25, 2023**

Please return completed form and resume to:

PGentry@CityofBelleairBeach.com

City of Belleair Beach
Attn: City Clerk
444 Causeway Boulevard
Belleair Beach, FL 33786
727-595-4646