

Town of Montverde Florida Application to be considered for Appointment to Planning & Zoning Board

All information must be provided in order to be co	onsidered. Please type or provide an easy-to-read print.
Name:	Telephone:
email address:	Occupation:
Home Address:	
Do you reside within the Town limits of Montverd	le? Yes No how long?
Are you a registered voter in Lake County: Y	'es No
I am available for meetings on Wednesday between	een the hours of 6:30 PM and 10:30 PM Yes No
Are you available for special meetings that may o	occur on other days? Yes No
Please explain any relevant experience that wou	ld qualify you to serve on the Planning & Zoning Board:
Do you currently serve on any other boards: Non please provide your position and duties as a boa	n-profit, volunteer, civic clubs, or any other groups? If so,
produce previde your position and addice de a soa	



Explain why you want	to serve on the Planning & Zoning Board:	
If you were appointed member.	, explain what your short-term and long-teri	m goals are as a Planning & Zoning Board
authorize the release		to verify all information provided and I further of such information which may be requested and accurate to the best of my knowledge.
Signature:	Printed Name	Date:

All applications must be submitted to the Town Clerk by the above deadline. Town Hall is closed on Fridays, weekends, and all major holidays.

Please be advised, Florida has a very broad public records law. Most written communications to or from government officials regarding government business are public records available to the public and media upon request. Your application, email communication, or other written communications may therefore be subject to public disclosure.

If you require special accommodations due to a disability to participate in the application/selection process, you must contact the Town Clerk in advance the application deadline.