



**CITY OF POMPANO BEACH
ADVISORY BOARD / COMMITTEE
APPLICATION**

CITY OF POMPANO BEACH
OFFICE OF THE CITY CLERK
2015 APR 30 AM 11: 23

City Clerk's Office Phone: 954-786-4611 Fax: 954-786-4095
Post Office Drawer 1300, Pompano Beach, FL 33061
www.mypompanobeach.org

Mr. Mrs. Ms. Miss Name: Greg Eickhorn
(Optional)

Residence Information:

Home Address: 370 SE 11th Street
City/State/Zip: Pompano Beach FL 33060
Home Phone: 954-6-946-6455 Cell Phone: 954-649-0042
Email: geickhorn@southernwine.com Fax: _____

Business Information:

Employer/Business Name: Southern Wine & Spirits
Current Position / Occupation: Consulting
Business Address: 1600 NW 163rd Street
City/State/Zip: Miami FL 33169
Business Phone: 954-649-0042 Fax: _____ Email: _____

Are you a U.S. Citizen? Yes No
Are you a resident of Pompano Beach? Yes No Reside in District: 1 2 3 4 5
Do you own real property in Pompano Beach? Yes No
Are you a registered voter? Yes No
Have you ever been convicted of a felony? Yes No
Current or prior service on governmental boards and/or committees: N/A

Please make a check next to the Advisory Boards/Committees you would like to serve on:

<input type="checkbox"/> Affordable Housing	<input type="checkbox"/> Cultural Arts	<input type="checkbox"/> Parks and Recreation
<input type="checkbox"/> Air Park	<input type="checkbox"/> Education	<input type="checkbox"/> *Planning & Zoning/Local Planning Agency
<input type="checkbox"/> Architectural Appearance	<input type="checkbox"/> Emergency Medical Services	<input type="checkbox"/> *Police & Firefighter's Retirement System
<input type="checkbox"/> Budget Review	<input type="checkbox"/> *Employee's Board of Appeals	<input type="checkbox"/> Pompano Beach Economic Development Council
<input type="checkbox"/> Charter Amendment	<input type="checkbox"/> Employee's Health Insurance	<input type="checkbox"/> Public Art Committee
<input type="checkbox"/> Community Appearance	<input checked="" type="checkbox"/> *General Employee's Retirement System	<input type="checkbox"/> Recycling & Solid Waste
<input type="checkbox"/> *Community Development(CDAC)	<input type="checkbox"/> Golf	<input type="checkbox"/> Sand & Spurs Riding Stables
<input type="checkbox"/> CRA East	<input type="checkbox"/> Historic Preservation	<input type="checkbox"/> Marine
<input type="checkbox"/> CRA West	<input type="checkbox"/> *Housing Authority of Pompano Beach	<input type="checkbox"/> *Unsafe Structures
		<input type="checkbox"/> *Zoning Board of Appeals

***Financial Disclosure Form is required, if appointed to serve, upon appointment and upon resignation/retirement.**

In addition a Resume may be attached

Education: Bachelor's Degree from The University of Florida

Experience: To be discussed

Past Positions: N/A

Hobbies: Sports with Kids, Fishing, Boating, Golf

Making any false statements herein may be cause for revocation by the City Commission of any appointment to a Board/Committee.

Signature: Greg Eickhorn Date: 4/29/15

Initials of Clerk or Deputy: _____ Date received or confirmed: _____

Please check one: New Application Currently Serving on Board Updated Information

Note: Application is effective for one year from date of completion. If you have any questions on the above, please call the City Clerk's Office at: 954-786-4611, or send via fax to: 954-786-4095.



CITY OF POMPANO BEACH
ADVISORY BOARD / COMMITTEE
APPLICATION

CITY OF POMPANO BEACH
 OFFICE OF THE CITY CLERK
 2017 FEB 21 AM 10:20

City Clerk's Office Phone: 954-786-4611 Fax: 954-786-4095
 Post Office Drawer 1300, Pompano Beach, FL 33061
 www.pompanobeachfl.gov

Mr. Mrs. ___ Ms. ___ Miss ___ Name: PHILLIP SMITH
 (Optional)

Residence Information:

Home Address: 916 S.E. 10th ST.
 City/State/Zip: POMPANO BEACH, FL 33060
 Home Phone: 954-773-0977 Cell Phone: 954-610-5595
 Email: BLIMPGEAR@YAHOO.COM Fax: _____

Business Information:

Employer/Business Name: _____
 Current Position / Occupation: RETIRED
 Business Address: _____
 City/State/Zip: _____
 Business Phone: _____ Fax: _____ Email: _____

Are you a U.S. Citizen? Yes No ___
 Are you a resident of Pompano Beach? Yes No ___ Reside in District: 1 2 ___ 3 ___ 4 ___ 5 ___
 Do you own real property in Pompano Beach? Yes No ___
 Are you a registered voter? Yes No ___
 Have you ever been convicted of a felony? Yes ___ No
 Current or prior service on governmental boards and/or committees: _____

Please make a check next to the Advisory Boards/Committees you would like to serve on:

Affordable Housing	Cultural Arts	Parks and Recreation
Air Park	Education	*Planning & Zoning/Local Planning Agency
Architectural Appearance	Emergency Medical Services	*Police & Firefighter's Retirement System
Nuisance Abatement Board	*Employee's Board of Appeals	Pompano Beach Economic Development Council
Charter Amendment	Employee's Health Insurance	Public Art Committee
Community Appearance	<input checked="" type="checkbox"/> *General Employee's Retirement System	Recycling & Solid Waste
*Community Development(CDAC)	Golf	Sand & Spurs Riding Stables
CRA East	Historic Preservation	Marine
CRA West	*Housing Authority of Pompano Beach	*Unsafe Structures
		*Zoning Board of Appeals

*Financial Disclosure Form is required, if appointed to serve, upon appointment and upon resignation/retirement.

In addition a Resume may be attached

Education: ASSOCIATES DEGREE PHARMACY / BUSINESS-ACCOUNTING
(BROWARD COLLEGE)

Experience: _____

Past Positions: 1975-2014 GOODYEAR AIRSHIP OPERATIONS

Hobbies: GOLF, PADDLEBALL, PROCUREMENT

Making any false statements herein may be cause for revocation by the City Commission of any appointment to a Board/Committee.

Signature:  _____

Date: 2-21-17

Initials of Clerk or Deputy: _____

Date received or confirmed: _____

Please check one: New Application Currently Serving on Board Updated Information

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