



CITY OF POMPANO BEACH ADVISORY BOARD / COMMITTEE APPLICATION

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: PAUL WEBB
(Optional)

Residence Information:

Home Address: 2736 NE 10 ST
City/State/Zip: Pompano Beach, FL 33062
Home Phone: 954-942-9759 Cell Phone: 954-899-5041
Email: PAULSWEBB@AOL.COM Fax: _____

Business Information:

Employer/Business Name: RE MAX
Current Position / Occupation: AGENT
Business Address: 2301 E ATL BLVD
City/State/Zip: Pompano
Business Phone: 954-548-3728 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: EDC / ZBA

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
☐ Budget Review	☐ *Employee's Board of Appeals	☐ Pompano Beach Economic Development Council
☐ Charter Amendment	☐ Employee's Health Insurance	☐ Recycling & Solid Waste
☐ Community Appearance	☐ *General Employee's Retirement System	☐ Sand & Spurs Riding Stables
☐ *Community Development	☐ Golf	☒ Marine
☒ CRA East	☐ Historic Preservation	☐ *Unsafe Structures
☐ CRA West	☐ *Housing Authority of Pompano Beach	☐ *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

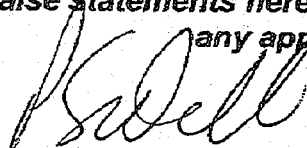
Education: BSEE ELECTRIC ENGINEERING

Experience: 25 years manager FPL 30 years Property Management 15 years Realtor

Past Positions: ZBA / EDC

Hobbies: Fishing

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

Signature: 

Date: 9/15/10

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.