

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. M (Optional)	iss Name:DA/	liel H	ORAK
Residence Information: Home Address:	224 NE 16 A	1E	
City/State/Zip:	POMPANO BEACH, F	C 330	060
	54 914 6204		
Email: d bank	@ bell south.net	_ CONT	
			
	me: IBC AIRN	PYS	
Current Position / Occi	upation: PILOT		
Business Address:	8401 NW 17	ST	
City/State/7in	MI AMI EL 33126		
Dissipant Phanes 2.6	501 80 80	*	Email:
Business Phone:	5 391 8080 Fax:		Email:
A	/ X N-		
Are you a U.S. Citizen?			
Are you a resident of Pom	pano Beach? Yes <u>K</u> No_	F	Reside in District: 1 2 3 <u>×</u> 4 5
Do vou own real property i	n Pompano Beach? Yes	No ❤<	
	-		
Are you a registered voter	? Yes No		·
Have you ever been convi-	cted of a felony? Yes	No_S	<i>j</i>
Current or prior service on	governmental boards and/or	committees	Air aark/Ems
		44	
Affordable Housing	to the Advisory Boards/Commi Cultural Arts		Parks and Recreation
Air Park	Education		*Planning & Zoning/Local Planning Agency
Architectural	✓ Emergency Medical Service	s l	*Police & Firefighter's Retirement System
Appearance	M		
Budget Review	*Employee's Board of Appea	als	Pompano Beach Economic Development
Charter Amendment	Employee's Health Insuranc	<u>e</u>	Council Recycling & Solid Waste
Community Appearance	*General Employee's Retire		Sand & Spurs Riding Stables
	System		
*Community Development	Golf	X	Marine
CRA East	Historic Preservation		*Unsafe Structures
X			
CRA West	*Housing Authority of Pompa Beach	ano X	*Zoning Board of Appeals
*Financial Disclosure Form is		pon appoint	ment and upon resignation/retirement.
G/CC/Adv Brd App	Page 1 of 2		6/23/2010

In addition a Resume	may be attached
Education: 4-year college - 5	3 BA
Experience: 5000 flight hours	involvement in local gevit.
Past Positions: Ampart Ops Andre	Ems advisory board womb
Hobbies: Boating, golf, flyin	g, civics
Making any false statements herein may be cause any appointment to a	
Signature:	Date: 07-01-2010
Initials of Clerk or Deputy:	Date received or confirmed: _7/1/10
Please check one: New Application Current	ly Serving on Board Updated Information
<u></u>	
	· ·
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.	

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

Mr._X_ Mrs.___ Ms.___ Miss___ Name: __William Roger Grissinger_____

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2	HO.

Residence Information: 2731 March Home Address:	NE 8 Court	D: 36
City/State/Zip: Pompano Bea		
Home Phone: 954-786-16	540 Cell Phone	Ð:
Business Information:		
	n:Owner	
	1058	
	ach, FL 33061	
Business Phone: <u>954-786-1</u>		
Do you own real property in Por Are you a registered voter? Ye Have you ever been convicted o	npano Beach? Yes_X No	eside in District: 1_X 2 3 4 5_
Please make a check next to the Affordable Housing Air Park	Advisory Boards/Committees you wo	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	*General Employee's Retirement System	Recycling & Solid Waste Sand & Spurs Riding Stables
*Community Development(CDAC)	Golf	Marine

CRA East

CRA West

*Housing Authority of Pompano

Historic Preservation

Beach

*Unsafe Structures

*Zoning Board of Appeals

*Financial Disclosure Form is required, if app	ointed to serve, upon appointme	ent and upon resignation/retirement.
In addi	tion a Resume may be att	tached
Education: BS Florida State University R	isk Management and Insura	ince
Experience: <u>Owner of insurance agency</u> Marinas, Yachts, Yacht Manufacturers)		
Past Positions:		
Hobbies:Fishing, Golf, Boating_		
	in may be cause for revo	ocation by the City Commission of
Why and	omanone to a Board, co.	6-12-17
Signature:	D	Date:
/ Initials of Clerk or Deputy:	KOA ,	Date received or confirmed:
militale of cloth of Bopaty.		54.6 (556)/64 61 66/mm/64.
Please check one: New Applica	ation Currently Serving on I	Board Updated Information

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5/12/2016

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