



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

City Clerk's Office
Post Office Drawer 1300
Pompano Beach, Florida 33061

www.mypompanobeach.org
Phone No. (954) 786-4611
Facsimile No. (954) 786-4095

IN ORDER TO ASSIST THE CITY COMMISSION IN MAKING MUNICIPAL BOARD AND COMMITTEE APPOINTMENTS, THE FOLLOWING INFORMATION IS REQUESTED:

NAME OF BOARD/COMMITTEE: Planning + Zoning Board

NAME OF APPLICANT: Fred Stacer

RESIDENCY ADDRESS: 2501 SE 9th Street

ZIP CODE: 33062 HOME PHONE NO.: 954-788-8623

MAILING ADDRESS: 2501 SE 9th St.

CITY/STATE/ZIP CODE: Pompano Beach Fl. 33062

ARE YOU A CITY RESIDENT? YES: X NO: _____

IF YES, PLEASE INDICATE DISTRICT YOU RESIDE IN : 1 ✓ 2 _____ 3 _____ 4 _____ 5 _____

DO YOU OWN REAL PROPERTY IN POMPANO BEACH? YES: ✓ NO: _____

ARE YOU A REGISTERED VOTER? YES: ✓ NO: _____

HAVE YOU BEEN CONVICTED OF A FELONY IN FLORIDA, OR ANY OTHER STATE, WITHOUT YOUR CIVIL RIGHTS HAVING BEEN RESTORED? YES: _____ NO: X

BUSINESS OR OCCUPATION: General Contractor/Consultant

BUSINESS ADDRESS: 6278 N. Federal Hwy #382

CITY/STATE: Ft. Lauderdale Fl. 33308

ZIP CODE: 33308 BUSINESS PHONE NO: 954-801-7164

ARE YOU PRESENTLY SERVING ON ANY OTHER CITY BOARD OR COMMITTEE? Y

IF YES, PLEASE LIST NAME:

Unsafe Structures

WOULD YOU CONSIDER SERVING ON ANY OTHER CITY BOARD OR COMMITTEE? Not Currently

IF YES, PLEASE LIST NAME(S):

HAVE YOU EVER SERVED ON A CITY OF POMPAÑO BEACH BOARD/COMMITTEE? Y

IF YES, PLEASE STATE NAME OF BOARD OR COMMITTEE: Budget Review

PLEASE LIST THE FOLLOWING BACKGROUND INFORMATION, WHICH WOULD QUALIFY YOU TO SERVE ON THIS BOARD OR COMMITTEE:

16 Years Consultant in Construction for (FBI, School Board, S.F. Water Mnt etc)

EDUCATION: Masters in Bus. Adm., Bachelor in Bus Adm

EXPERIENCE: 28 Years in Construction, 26 Years State Licensed Building Contractor

CURRENT POSITION: President, Homsey Inc, President of Gaslight City, Inc.

PAST POSITIONS: VP, C. Craig Edwards Inc.

HOBBIES: Golf, Boating

MAKING ANY FALSE STATEMENTS HEREIN MAY BE CAUSE FOR REMOVAL BY THE CITY COMMISSION.


SIGNATURE OF APPLICANT

2/18/08
DATE OF APPLICATION

INITIALS OF CLERK OR DEPUTY

DATE RECEIVED OR CONFIRMED

NOTE: IF YOU DO NOT WISH TO SERVE ON THIS BOARD OR COMMITTEE, PLEASE EITHER CHECK HERE _____ AND RETURN TO CITY CLERK, OR NOTIFY THE CITY CLERK'S OFFICE IN WRITING OF YOUR DESIRE NOT TO SERVE.

THIS SECTION MUST BE COMPLETED BY THE ADVISORY BOARD SECRETARY ONLY

NUMBER OF MEETINGS HELD: _____ NUMBER OF MEETINGS ATTENDED: _____