

CITY OF EDGEWATER  
CITY CLERK'S OFFICE

104 North Riverside Drive  
Edgewater, Florida 32132

cityclerk@cityofedgewater.org

Phone: (386) 424-2400 X 1102

FAX: (386) 424-2410



ADVISORY BOARD APPLICATION

Please choose the Board(s) for which you wish to apply. **If applying for more than one Board, you must number in order of your preference.**

Animal Control Board

Library Board

Construction Board of

Adjustments & Appeals

Firefighters Pension Board

Veterans Park Advisory Committee

Citizen Code Enforcement Board \*

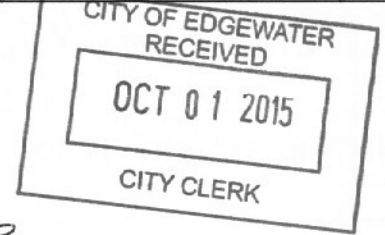
Police Pension Board\*

Recreation & Cultural Services Board

Planning & Zoning Board

School Scholarship Committee

*Beautification Committee*



Members of the Boards with an asterisk (\*) are required to file a Financial Disclosure form within 30 days of appointment.

**PERSONAL INFORMATION**

Name Rose Hoffman

Address 2404 Travelers Palm Dr.

Home Phone 386 Business/Cell Phone 386 527-2424

E-Mail Address r.hoffman713@hotmail.com

Occupation Retired Are you a resident of Edgewater? Yes how long \_\_\_\_\_

Is your principal place of employment in Edgewater? \_\_\_\_\_

Are you currently serving on a City Board? No Have you ever served on a City Board? Yes

If yes, when and which Board? Beautification

**REFERENCES – Please list three business and/or personal**

Mike Visconti 316 Pini Breeze Dr.  
Name, address and phone

Bonnie Brown 104 N. Riverside Dr.  
Name, address and phone

Joe Fiashchi Cell 386-847-2662 - 386-424-9263 H  
Name, address and phone

**EDUCATION**

High School 12 years  
College 1 1/2 years / Business  
Degree(s) \_\_\_\_\_

**WORK EXPERIENCE** Owner of 4Store Mini Storage + Roses Specialties + Data Shredders

**INTEREST/ACTIVITIES** Gardening

**COMMUNITY INVOLVEMENT** \_\_\_\_\_

**WHY DO YOU DESIRE TO SERVE ON THIS/THESE BOARD(S)?**  
To Clear up + Beautify our City again!

**EXPERIENCE/QUALIFICATIONS RELATED TO BOARD(S) APPLYING FOR**  
Previous on Board

A resume or separate sheet with additional information may be included with your application. Please return application to the City Clerk's office.

I understand the responsibilities associated with being a board member, and I have adequate time to serve if appointed.

[Signature]  
Applicant Signature

9-30-15  
Date

<b>OFFICE USE ONLY</b>
Date application received _____
Date appointed to board _____
Board appointed to _____
Date resigned from board _____