

APPLICATION FOR APPOINTMENT TO THE BOARD OF APPEALS

The following information will be used by the City Council committee in its consideration of appointments. The information will become part of resource files for appointment opportunities.

Please submit completed application to:

City of Mauldin Attn: City Clerk P.O. Box 249

Mauldin, SC 29662

or Cindy Miller at

CMiller@MauldinCitySC.com

Application Date	Full Name		Date of Birth
Address of Current Residence			# of Years at Current Residence
Phone #		E-mail Address	
Current Occupation/Title		Company	
EXPERIENCE			
Have you ever served on a board of appeals or zoning board? ☐ Yes ☐ No			
If yes, please describe where, when, and the number of years			
Do you have experience in any of the following fields (mark all the apply)			
☐ Land Use Law ☐ Architecture ☐ Urban Planning ☐ Building Construction ☐ Real Estate			
Civil Engineering Land Development Historic Preservation Land Development Banking			
□ Natural Resource Management			
Please describe your experience, including the number of years of your experience, for each field you marked above			



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OTHER INFORMATION			
Why would you like to be considered for appointment to the board of appeals?			
What does Mauldin need now and in the future?			
Describe your familiarity with the legal and quasi-judicial responsibilities of the board of appeals			
Describe your familiarity with the City's development regulations, zoning ordinances and building codes			
CERTIFICATION AND ACKNOWLEDGEMENT			
I hereby declare that I am a registered voter at least 18 years of age and that I have resided in the City limits of Mauldin for at least 12 months.			
I understand that members appointed to the board of appeals are requested to serve until the expiration of their respective term, which is generally 3 years, but may resign upon written notice to the City of Mauldin. Likewise, the City may choose to end a member's service on the board of appeals prior to the end of the term and may do so for any reason whatsoever upon written notice to such member.			
I further declare that I am willing to devote the time necessary to carry out the responsibilities and requirements of service on the board of appeals. I understand that information on this form will be considered public information.			
Signature: Date:			