CITY OF OCALA

BOARD AND COMMISSION APPLICATION

Name: Howard L. Gunn, Jr.	Home Phone: (352) 572-1063
Home Address: 2801 SW 15th St.	
City, State, Zip Code: Ocala,FI, 34474	
Business: Gunn's Professional Llwan and Landscape	Business Phone: (352) 572-1063
Business Address: 2801 SW 15th st., Ocala,FL 34474	
Occupation: Retired Educator/ Real Estate Devloper	Email Address: usa352@aol.com
Brief Resume of Education and Experience: Member of Housing Board of Directors Bachelors in Agribusiness	
Are you a Resident of Marion County? (If so, state length of time)	Yes No No Number of Years: 37
Do you own property within the City limits?	Yes No O
Do you reside within the City?	Yes No O
Do you own a business within the City?	Yes No O
Are you a registered City voter?	Yes No O
Do you hold a public office?	Yes No O
Are you employed by the City?	Yes No No
At the present time, do you serve on a City Board, Commission, Authority, or Committee?	Yes No
Please Note: A board/commission member shall no board/commission at a time, unless that board/com Please check the boards(s)/commission(s) you wish to serve	nmission is an interim Ad Hoc Committee.
number in order of your preference.	e on. If you have more than one interest, please
- Affordable Housing Advisory Committee - Airport Advisory Committee - Board of Adjustment * / ** - Golf Advisory Board - Municipal Arts Commission - Municipal Code Enforcement Board * - Municipal Tennis Association Advisory Board	Ocala Historic Preservation Advisory Board ✓ - Ocala Housing Authority - Planning and Zoning Commission * / ** - Recreation Commission - Tree Commission - Utility Advisory Board
* Requires Financial Disclosure Form (if appointed to board/o ** Requires Property Description	commission)
Property Description:	

Until such time as you are selected for the board/commission of your choice, can we submit your application when vacancies occur without contacting you each time? Yes No
Why do you think you are qualified to serve on this Board?
I HEREBY CONFIRM THAT I HAVE READ AND UNDERSTAND THIS APPLICATION, THAT ALL INFORMATION FURNISHED BY ME IS TRUE AND ACCURATE AND THAT, TO THE BEST OF MY KNOWLEDGE, I MEET THE CRITERIA FOR SERVING ON THE BOARD(S)/COMMISSION(S) FOR WHICH I AM APPLYING.
Signature: Amard 8, Sum Jr Date: 02 2022

Notes:

- (1) Application effective for ONE YEAR from date of completion
- (2) If you have any questions regarding this application, please call the Office of the City Clerk at (352) 629-8266

Return to:

City Clerk's Office 110 SE Watula Avenue Ocala, FL 34471