

**CITY OF OCALA
DOWNTOWN OCALA CRA ADVISORY COMMITTEE APPLICATION**

1. Name: Rachel Laxton Home Phone: 352-857-5262
2. Home Address: 1850 SE 18th Ave Apt 3403
3. City, State, Zip Code: Ocala FL 34471
4. Business: Crystal Snook Group Business Phone: 352-857-5262
5. E-mail address: rachel@crystalsnookgroup.com
6. Cell Phone: 352-857-5262
7. Business Address: 215 SE 8th St. Occupation: Realtor
8. Are you a resident of Marion County Yes No
9. Do you reside within the City? Yes No
10. Do you own a business within the City? Yes No
11. Are you a registered City voter? Yes No
12. Do you hold a public office? Yes No
13. Are you employed by the City? Yes No
14. At the present time, do you serve on a Board, Commission, Organization or Committee? Yes No
15. Name of Board, Commission, Organization or Committee _____

Rachel Laxton
Signature

1/6/23
Date

Staff Only:

Date of Application: _____

Approval Date by City Council: _____