



Candidate Information Form

Date: \_\_\_\_\_

Which Board or Commission are you interested in serving on? (Please circle selection):

Board of Zoning Appeals

Planning & Zoning Commission

Full Name: \_\_\_\_\_

Home Address:  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Please provide a short bio about yourself:

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