

Staff Use Only:

Council District

22

This application is a

Reappointment

New Appointment

GREENVILLE COUNTY SPECIAL TAX DISTRICT APPLICATION

Lake Forest Special Tax District

An individual may only apply to serve on one board or commission during any election cycle.

In order for your application to be given consideration, it is critical that you answer all of the following questions as completely as possible.

Mr Mrs Ms Miss

John E. Austin

Home Address

308 McCarter Ave

City

Greenville

Zip 29615

Home Phone

Work Phone

Voter Registration Number

Email

****You must be registered to vote in Greenville County at the time of application**

Occupation

Real Estate Broker

Employer

Employer Address

Volunteer Experience

Do you currently hold any elected or appointed office or commission

No

If yes, list

Have you ever been fined for any ethics violations?

No

If so, please comment

Describe your understanding of the role of a member of the board or commission to which you are applying _____

We are creating a 3 member board to oversee the Lake Forest Special Tax District. The board will oversee the implementation of additional street lighting as well as installing neighborhood signage.

What specific skills do you believe you could contribute as a member of this board or commission? _____

I have experience running a business as well as serving on community boards.

Have you ever been convicted of a crime other than a minor traffic violation?

Yes

No

Do you, any member of your family or a business with which you or a member of your family is associated, provide goods and/or services to this board for payment?

Yes

No

Statement

By my signature, I state that all information contained in this application is true and accurate to the best of my knowledge.

I understand it is my responsibility to insure my application is submitted within the application period and that it has been received by the County Council Office.

I understand my appointment to the board for which I am applying will not result in me receiving any compensation for my service.

Signature _____

Date _____

Recommended by _____

Please return completed form to:

**Greenville County Council
301 University Ridge, Suite 2400
Greenville, SC 29601-3665**

If you have questions, please call 467-7115 or check the www.greenvillecounty.org website.