

CITY OF FLORENCE
FLORENCE URBAN RENEWAL AGENCY BUDGET COMMITTEE

Application Form

Date: _____

Name: _____

Address: _____

Mailing Address: _____

Phone (Home): _____ Work: _____

Email: _____

1. _____ Number of year(s) you have lived in the Florence Area?
2. _____ Is your home within the city limits of Florence?*
3. _____ Can you see any potential conflicts of interest, either personal or financial that would prevent you from making impartial decisions?
4. What is your occupation/position? (If retired what was your occupation /position?)

5. Please give a brief statement explaining why you desire to be a member of the FURA Budget Committee.