OCT 2 4 2022

## HERNANDO COUNTY BOARD OF COUNTY COMMISSIONERS BOARD/COMMITTEE APPLICATION

Board of County Commissioners

Please type or print clearly

		reads type of print stearing	
Name of Board/Committee Plan		Zoning Commission	
Check one:	<b>☆</b>	Full Member Position Alternate Member Position	
Name Christopher Louis I			
(You	ir name must	be listed as it appears on your voter registration card)	
RECORD UPON SUBMITTINE EXEMPTION TO THE RELE THE BASIS OF YOUR EXEM	NG THIS A EASE OF T MPTION. 'LT IN YO	REQUIRED FOR COUNTY RECORDS AND APPLICATION. IF YOU BELIEVE THAT YOU HIS INFORMATION, PURSUANT TO F.S. 119 YOUR FAILURE TO ANSWER FULLY AND DUR APPLICATION BEING DENIED OR YOUTTEE IF APPOINTED.	UQUALIFY FOR AN 1.07, PLEASE STATE TRUTHFULLY ALL
Address 715 Oakdale Ave #	18		
City Brooksville		Zip 34601	
Telephone 727-507-1152		(home)	(business)
E-mail address			
Are you a resident of Hernand			
Voter Registration Number 1	18548840		
Education(Please	include any c	ertificates, awards, diplomas, degrees, professional license n	umbers, etc.)
Employment History(Attack	h a resume if a	available)	
Licenses or Certificates Held			
Have you ever previously applie	ed for a pos	ition on any County Board/Committee? Yes	
If yes, please state the Board(s)/	Committee	(s) you applied for, when you applied, and whethe	r you were appointed.
I currently serve on WAC, LAC	C and Boar	d of Construction and Regulation.	
Have you ever been convicted misdemeanor? no	, plead guil	Ity or no contest, or entered into PTI for a felo	ony or 1 <sup>st</sup> / 2 <sup>nd</sup> degree
Are you currently involved as a			
Have you ever been named as a			
If yes, when and describe action.	Family Lav	v Matter	

Please state your reasons for applying to this Board/Committee						
With the growth this county is seeing I would love to be engaged in the process of how and where we grow						
Please list three character references of persons NOT related to, NOT an employer, NOT an employee of you or your company, and whom you have known at least one (1) year. Please include addresses and phone numbers.						
1. Senator Nick Diceglie						
2. Senator Danny Bugress						
3. Senator Blaise Ingoglia						
I hereby request consideration as a committee/board appointee. It is my intention to familiarize myself to the duties and responsibilities of the office to which I may be appointed, and to fulfill the appointment to the best of my ability, exercising good judgement, fairness, impartiality, and faithful attendance. By my signature below, I hereby authorize Hernando County to check my references and my background, including, without limitation, obtaining a criminal history check. I also agree to file a Financial Disclosure form as required by State law, if applicable, and abide by provisions of the State Sunshine Law.						
I hereby swear and affirm, under Penalty of Perjury, that the above information is true and correct.						
Applicant s signature						
(Please direct all inquiries to the County Administrator's Office at 754-4002.)						

Completed applications may be submitted to the County Administrator's office, 15470 Flight Path Drive, Brooksville, Florida 34604, or faxed to 352-754-4025 Attention: Jessica Wright.



## Hernando County Background Consent / Release Form

As a volunteer applicant, I understand and acknowledge that an investigative report may be compiled on me. This report may include information regarding any criminal records, and from various public and private sources including law enforcement agencies at the Federal, State or County level, courts record repositories, sexual offender registries and any other source required to verify information that I have voluntarily provided.

PERSONAL INFORMATION								
Legal Name:	Christopher Licata III							
Date of Birth:	03/20/1991							
Other Names Used:								
	(Legal Name) First	M.I.	Las	Last				
Dates Used (from/to):								
Home Phone #:	-							
Cell Phone #:	7275071152							
E-mail Address:	ChrisLicata3@gmail.com							
Are you 18 years of age or older?  ☐ Yes ☐ No								
GEOGRAPHIC INFOR	MATION			9 1				
Current Address:	715 Oakdale Ave #18							
City, State, Zip:	Brooksville FI 34601							
Time at this address:	Years	2	Month					
Previous Address:	3781 Bramblewood Loop							
City, State, Zip :	Spring Hill FI 34609							
Time at this address	3 Years	6	Month					
By signing below, you hereby authorize, empower and release from all liability, without reservation, any agency contacted by Hernando County to furnish the above-mentioned information. You further authorize ongoing procurement of the above-mentioned information at any time during your relationship with Hernando County. You agree that a fax or photocopy of this authorization is to be considered and accepted with the same authority as the original.  Applicant's Signature  Date								