

MAYOR  
Hal J. Rose

DEPUTY MAYOR  
Andrea Young

COUNCIL MEMBERS  
Daniel Batcheldor  
Pat Bentley  
John Dittmore  
Daniel McDow  
Stephen Phrampus



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## CITY OF WEST MELBOURNE APPLICATION FOR APPOINTMENT TO CITY COUNCIL

Article III, Section 10 of the West Melbourne City Charter provides, in pertinent part:

A vacancy in the office of any city council member other than the mayor shall occur upon death, resignation, removal from office as authorized by law, or forfeiture of office of such a council member. A vacancy in the office of city council member shall be filled as follows:

- (1) *Ninety (90) days or more prior to the next regularly scheduled city council election.* When a vacancy on the city council occurs ninety (90) days or more prior to the next generally scheduled city council election, the council shall appoint a person to serve until the next regularly scheduled city council election, at which time a person shall be elected to serve the remainder of the unexpired term, if any.
- (2) *Within ninety (90) days of the next regularly scheduled city council election.* When a vacancy on the city council occurs within ninety (90) days of the next generally scheduled city council election, the council shall appoint a person to serve the remainder of the unexpired term for the vacant seat.
- (3) Any appointment of a person to serve as a council member shall be by the affirmative vote of at least four (4) council members, with each member having but one vote. Such a person shall meet the qualifications for council members specified in this Charter.

Council Member Daniel Batcheldor has announced his resignation from the City Council effective June 1, 2022, at which time a vacancy on the City Council will occur. The vacant council seat has a remaining unexpired term that will end on November 22, 2022. Pursuant to Article III, Section 10 of the City Charter, the remaining council members shall appoint a person to fill the vacancy. The City Council will consider the appointment at its regularly scheduled meeting on June 7, 2022.

The City Council will accept applications for appointment to the vacant council seat

until **5:00 p.m. on Monday, May 30, 2022**. All applications must be received by the City Clerk, and fingerprinting completed, prior to the end of the application period.

### **INSTRUCTIONS**

Complete the following form in the space provided. This application form may be typed or handwritten, and you may attach additional pages if insufficient space is provided for your response. To submit your application, please contact City Clerk Cynthia Hanscom at (321) 837-7774 or by e-mail at: [chanscom@westmelbourne.gov](mailto:chanscom@westmelbourne.gov) to schedule an appointment. Please provide your completed, notarized application and authorization and release for criminal history records check, along with a current résumé. Allow approximately 30 minutes for fingerprinting so that the required background check may be performed.

If you have any questions regarding this application or the appointment process, please contact City Attorney Morris Richardson at (321) 837-7772 or by e-mail at: [mrichardson@westmelbourne.gov](mailto:mrichardson@westmelbourne.gov).

**APPLICATION**

**A. PERSONAL INFORMATION**

- 1. Applicant Name: \_\_\_\_\_
- 2. Home Address: \_\_\_\_\_
- 3. Business Address: \_\_\_\_\_
- 4. Telephone: \_\_\_\_\_
- 5. Email Address: \_\_\_\_\_
- 6. To which address do you prefer correspondence regarding this application be sent?  Home  Business
- 7. Is your home address, telephone number, or other personal information exempt from Chapter 119, Florida Statutes, regarding Public Records?  Yes  No  
If yes, please explain: \_\_\_\_\_

**B. ELIGIBILITY**

The information provided in this section is for the purpose of determining whether you are eligible to serve on the City Council.

- 1. Are you an elector of West Melbourne duly registered to vote in Brevard County?  Yes  No
- 2. Have you continuously resided in the City of West Melbourne, or in an area that has been annexed by the City of West Melbourne, since June 7, 2021 or earlier?  Yes  No

**C. SPECIAL QUALIFICATIONS**

- 1. Please state any special qualifications that you believe are relevant to the City Council’s consideration of your application, including any type of experience, training, licensure or certification you hold, as well as any civic, professional, or other organizations to which you belong:

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2. Please provide any additional information that you believe is relevant to your appointment to the West Melbourne City Council:

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**D. ETHICAL DISCLOSURE AND ACKNOWLEDGEMENTS**

1. If appointed, will you file required financial disclosure forms?  Yes  No
2. Has probable cause ever been found that you were in violation of Chapter 112, Part III, Florida Statutes, the Code of Ethics for Public Officers and Employees?  Yes  No

If yes, please provide the date(s), nature of violation(s), and disposition(s):

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3. Have you ever been convicted or found guilty of, or entered a plea of nolo contendere, no contest to, or guilty to, regardless of adjudication, a crime in any jurisdiction, or are you currently under criminal investigation? This question applies to any criminal violation of the laws of any municipality, county, state or nation, including felony, misdemeanor and traffic offenses (but not parking, speeding, inspection, or traffic signal violations), without regard to whether you were placed on probation, had adjudication withheld, were paroled, or pardoned.  Yes  No

If yes, please provide the date(s), place(s), nature of violation(s), and disposition(s):

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4. Do you know of any reason why you would not be able to attend fully to the duties of a council member?  Yes  No If yes, please explain:

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I HEREBY ACKNOWLEDGE THE EXISTENCE OF THE CODE OF ETHICS FOR PUBLIC OFFICERS [PART III OF CHAPTER 112, FLORIDA STATUTES] AND THE FLORIDA GOVERNMENT IN THE SUNSHINE LAW [SECTION 286.011, FLORIDA STATUTES], WHICH WILL PERTAIN TO ME IF I AM APPOINTED TO THE CITY COUNCIL. IF APPOINTED, IT IS MY SOLE OBLIGATION AND DUTY TO COMPLY WITH SUCH LAWS.

I HEREBY ACKNOWLEDGE THAT SHOULD I BE APPOINTED, I SHALL FILE A FINANCIAL DISCLOSURE FORM WITH THE SUPERVISOR OF ELECTIONS FOR BREVARD COUNTY WITHIN 30 DAYS OF APPOINTMENT.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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

**CERTIFICATION / AFFIDAVIT**

STATE OF FLORIDA  
COUNTY OF BREVARD

Before me, the undersigned Notary Public, personally appeared \_\_\_\_\_ who, after being duly sworn, says: (1) that he/she has carefully and personally reviewed the answers to the foregoing questions; (2) that the information is complete and true; (3) that he/she executed the foregoing instrument of his/her own free will and accord, with full knowledge of the purpose therefore, and (4) that he/she agrees to serve if appointed, will support the Constitution and will obey the laws of the United States and the State of Florida, and will, in all respects, observe the provisions of the Charter and ordinances of the City of West Melbourne, and will faithfully discharge the duties of the office of City Council Member.

\_\_\_\_\_  
Signature of the Applicant

Sworn and subscribed before me by means of  physical presence or  online notarization, this \_\_\_\_ day of \_\_\_\_\_, 2022, by \_\_\_\_\_ as applicant for appointment to the West Melbourne City Council.

(Notary Seal)

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Print, type, or stamp commissioned name

Personally Known OR  Produced Identification \_\_\_\_\_  
Type of identification produced

**Date and time received by the City Clerk's Office:** \_\_\_\_\_

## **AUTHORIZATION AND RELEASE FOR CRIMINAL HISTORY RECORDS CHECK**

Pursuant to Section 2-11 of the City of West Melbourne Code of Ordinances and Resolution No. 2015-27, requiring that City Council Members submit to a criminal history records check, I hereby authorize the City of West Melbourne, its agents, employees, officers and assigns to submit a set of my fingerprints and this form to the Florida Department of Law Enforcement for the purpose of accessing and reviewing Florida and national criminal history records that may pertain to me. I understand that I would be able to receive any national criminal history record that may pertain to me directly from the FBI, pursuant to 28 CFR Sections 16.30-16.34, and that I could then freely disclose any such information to whomever I chose. By signing this Application, it is my intent to authorize the dissemination of any national criminal history record that may pertain to me to the City of West Melbourne pursuant to Section 166.0442, Florida Statutes.

I release from liability all persons and/or entities supplying such information. I release, indemnify and hold harmless the City of West Melbourne, its agents, employees, officers and assigns from all claims, demands, suits or causes of action and liabilities which may result from making such requests. I agree that a fax or photocopy of this document with my signature will be accorded the same authority and authenticity as the original. I understand that the information obtained from the criminal history records checks conducted pursuant to this authorization may be considered by the City Council in determining my suitability for appointment to the City Council. I understand that upon my request, I will be provided a copy of the state and national criminal history report and that I am entitled to challenge the accuracy and completeness of any information contained in any such report.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_