

**JULY 23, 2014**  
**PUBLIC NOTICE / MEDIA RELEASE**

FOR MORE INFO, CALL PUBLIC INFORMATION OFFICER  
STEVE d'OLIVEIRA AT 954-640-4209 OR 561-523-8198.



## **RESIDENT SOUGHT TO SERVE ON A1A BOARD**

The **Town of Lauderdale-By-The-Sea** is seeking a Town resident to serve on the **Broward County Corridor Management Entity** and **Corridor Advocacy Group**, which meets monthly on important issues related to **State Road A1A**, a **Florida Scenic Highway** that runs through our seaside community.

The County wants one resident from each coastal city to serve on the Corridor Management Entity Committee and to become part of the Corridor Advocacy Group as it deals with key matters impacting State Road A1A.

The advocacy group meets monthly during the day. The next meeting on Aug. 21 will look at how to better promote A1A in Broward.

State Road A1A is a scenic gateway to the natural, cultural, historic, archaeological and recreational splendors of the Atlantic Ocean in South Florida. It extends 32 miles along the east coast of Broward.

To apply for this position, please complete the attached form and submit it to **Town Clerk Tedra Smith** by Aug. 12.



## TOWN OF LAUDERDALE-BY-THE-SEA APPLICATION FOR BOARDS & COMMITTEES

Name of Board: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

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

City State Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Occupation: \_\_\_\_\_

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

Work Phone: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Are you a Town resident? Yes \_\_\_ No \_\_\_ How long? \_\_\_ Years \_\_\_ Months

Are you a registered voter within the Town? Yes \_\_\_ No \_\_\_

Are you presently serving or have you ever served on any other board/committee? Yes \_\_\_ No \_\_\_

If so, which one(s)? \_\_\_\_\_

Please list your background experience, education, experiences, interests/hobbies which qualify you to serve on this board/committee:

Experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Education: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Interests/Hobbies: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please attach additional page, if needed

Applicant Signature \_\_\_\_\_

Name (printed) \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

- Making false statements herein may be cause for removal by the Town Commission.
- Please return your completed form to the Town Clerk's Office.