



MAR 1 3 2023

City Clerk

APPLICATION FOR APPOINTMENT - CITY COUNCIL SEAT 5

City of Palm Bay • 120 Malabar Road • Palm Bay, FL 32907 Phone: 321-952-3414 • www.palmbayflorida.org • Fax: 321-953-8971

建筑和设置的 对于1987年,1
Full Name: Dawn Marie Bittar
Home Address: 479 Fountain ST SW
City: Palm Bay
Telephone Number: 321-806-0384 Zip Code: 32908
Email Address: PalmBayDawnBittar@gmail.com Fax Number: NA
EMPLOYMENT
Employer: The Greater Palm Bay Chamber of Commerce Occupation: Partner Relations Coordinator
Address: 4100 Dixie Hwy NE
City: Palm Bay State: FL Zip Code:
Telephone Number: 32905
Email Address: Dawn@GreaterPalmBayChamber.com
Job Responsibilities: Business Partner Relations and Development
EDUCATION
High School Name: Miami Killian SR High
Location: Miami, FL Years Completed: 3 Major/Degree:
College Business or Trade School: EFSC
_ocation: Palm Bay, FL Years Completed: 1 Major/Degree:
Professional School:
Location: Years Completed: Major/Degree:
Other:
ocation: Years Completed: Major/Degree:

APPLICANT INFORMATION
Have you ever held a business tax receipt? Yes No If yes, please provide the following:
321 Plumbing Inc.
Title: Co-Owner /Financial Qualifier
Issue Date: 2009 Issuing Authority: City of Palm Bay and DBPR
If any disciplinary action has been taken, please state the type and date of the action taken:
Disciplinary Action: Disciplinary Date:
Are you a resident of the City? Yes No If yes, how long? 14 Years 1 Months
How long have you been a resident of Brevard County? 27 Years 4 Months
Are you a United States citizen? Yes No
Are you a registered voter of the City? Yes No
Are you employed by the City? Yes No If yes, what department?
Do you presently serve on a City board(s)? Yes No If yes, please list board(s):
Community Development
Have you previously served on a City board(s)? Yes No If yes, please list board(s):
Citizen's Budget Advisory
Are you currently serving on a board, authority, or commission for another governmental agency?
Yes No If yes, what board(s):
Have you ever been convicted or pled guilty to a criminal charge or pled nolo contendere (no contest)
to a criminal charge? Yes No If yes, what charge:
Where: When: When:
Disposition was: Convicted Pled Guilty Pled No Contest
Have your civil rights been restored? Yes No
Are you a member or participant of any community organizations? Yes No
If yes, please list: Rotary Club of Palm Bay

What are your hobbies / interests? Roller Skating, Cycling, Golfing, Cooking and Gardening	
Why do you want to serve on City Council?	Serving the City in the role of councilman stems
from my passion for our community and to be a repr	resentative of the positive changes impacting our local
governance. As a prior business owner in the City of	Palm Bay, board member for the City's Citizen's Budget
Advisory & Community Development Boards, as wel	ll as a 30 yr. professional in lending and real estate provides
the leadership experience which will contribute in a n	neaningful and relevant manner. Thank you!

APPLICATION CERTIFICATION

By filing this application with the City of Palm Bay and placing my signature below, I do hereby acknowledge the following:

- 1. This Application, when completed and filed with the Office of the City Clerk, is a PUBLIC RECORD under Chapter 119, Florida Statutes, and is open to public inspection.
- 2. I am responsible for keeping the information on this form current and that any changes or updates will be provided to the Office of the City Clerk.
- 3. I consent to filing the Statement of Financial Interests. http://www.ethics.state.fl.us
- 4. If appointed, I acknowledge that it is my obligation and duty to comply with the following:

Code of Ethics for Public Officials (Florida Statutes, Chapter 112, Part III) Florida Sunshine Law (Florida Statutes, Chapter 286) http://www.flsenate.gov/Statutes

5. I understand the responsibilities associated with being a council member, and will have adequate time to serve on City Council.

The information provided on this form is true and correct, and consent is hereby given to the City Council or its designated representative to verify any and/or all information provided.

Signature:

Submit the application to:

City of Palm Bay

Office of the City Clerk

120 Malabar Road, SE

Palm Bay, Florida 32907

City of Palm Bay, Florida

RESIDENCY OF CANDIDATE AFFIDAVIT

I, Dawn Bittar, a candidate for the Office of City Council (check one);		
Mayor		
City Council Seat 2		
City Council Seat 3		
City Council Seat 4		
City Council Seat 5		
do hereby solemnly swear or affirm:		
1) I have been a resident of the City of Palm Bay for at least two (2) years immediately preceding the selection date (April 13, 2023).		
2) I am a registered voter of the City of Palm Bay, residing at a City address.		
3) Have you ever been convicted of a felony? Yes No		
If 'yes', have your civil rights been restored? Yes No		
UNDER PENALTY OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE FACTS STATED IN IT ARE TRUE.		
Date Signature of Candidate		
Address: 479 FOUNTAIN ST SW		
city: Palm Bay State: FL Zip Code: 33908		



AUTHORIZATION TO OBTAIN FDLE BACKGROUND REPORT(S)

I hereby authorize the City of Palm Bay (the "City") to request and receive criminal history record information from the Florida Department of Law Enforcement (FDLE) or similar law enforcement/governmental agencies about me for purposes of City Council considering my application to be appointed to a current vacancy on the City Council, including but not limited to, for purposes of confirming my fitness for initial appointment to fill this vacancy, and any other use not prohibited by law. I acknowledge the criminal history report will be provided to City Council to aid in their decision making. I understand that I may withhold my permission and that in such a case, no investigation will be done, and the City Council will not consider my application to fill the vacant seat on City Council.

This Authorization is valid for current reports, and I specifically understand that the City intends for this Authorization to cover only my application for the current vacancy. I further understand that I am responsible for the costs associated with the criminal background check (\$24.00*).

Printed Name (First, Middle, Last)

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*Payable by check, cash or money order