



### 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

Full Name:   
Home Address:   
City:   
Telephone Number:  Zip Code:   
Email Address:  Fax Number:

### EMPLOYMENT

Employer:  Occupation:   
Address:   
City:  State:  Zip Code:   
Telephone Number:  Fax Number:   
Email Address:   
Job Responsibilities:

### EDUCATION

High School Name:   
Location:  Years Completed:  Major/Degree:   
College Business or Trade School:   
Location:  Years Completed:  Major/Degree:   
Professional School:   
Location:  Years Completed:  Major/Degree:   
Other:   
Location:  Years Completed:  Major/Degree:



## APPLICANT INFORMATION

Have you ever held a business tax receipt?  Yes  No *If yes, please provide the following:*

Title:

Issue Date:  Issuing Authority:

*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?*  19 Years  9 Months

How long have you been a resident of Brevard County?  19 Years  9 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):*

Have you previously served on a City board(s)?  Yes  No *If yes, please list board(s):*

Park & Rec, Charter Review

Are you currently serving on a board, authority, or commission for another governmental agency?

Yes  No *If yes, what board(s):*  Brevard County Planning & Zoning

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:

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:*



What are your hobbies / interests?

Why do you want to serve on City Council?

## 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, William Capote, 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.

3/8/2023      William Capote  
 Date      Signature of Candidate

Address: 1452 GLENDALE AVE N.W.

City: Palm Bay      State: FL.      Zip Code: 32907







## 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\*).**

Guillermo Capote

Printed Name (First, Middle, Last)

Guillermo Capote

Signature

3/8/2023

Date

\*Payable by check, cash or money order

