Image: Distribution of the specific distribution of the specifi
Please choose one:
I wish to be considered by Commissioner (please write in name)
I wish to be considered by any member of the Commission
Date: 12/10/2024
Name: Chris Heywang Email Address: DuskTillDawnLL@gmail.com
Home Address: 9851 NW 39th Street Cooper City, FL 33024
Cell #: 954-882-4211 Work #: 954-252-2666 Home #:
Home Address: 9851 NW 39th Street Cooper City, FL Cell #: 954-882-4211 Work #: 954-252-2666 Home #: Length of Residence in Cooper City 19 Years Months Length of Time as Business Person in Cooper City 19 Years Months
QUALIFICATIONS:
Please provide a brief statement outlining why you wish to serve on the applicable boards and/or committees selected. In addition, please attach copy of your resume or vita (optional):
values in Cooper City/ Royal Palm Ranches by being a member of the Royal Palm Ranches Advisory Board.
Experience in Board Subject:
Related Work or Civic Affiliation:
College (if appropriate): Broward College
Field of Study: Associate in Arts

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Other professional or technical training (Name of school, course name, etc.):
DISCLOSURES:
Are you or any of your relatives presently employed by the City of Cooper City?If yes,
please state names and City departments/divisions:
Are you aware of any potential conflict of interest that may arise from your serving on City of Cooper City boards and committees?If yes, please explain:
Do you have any unpaid or delinquent accounts, water bills, etc. owed to the City of Cooper City? NoIf yes, please list:
If you own property in the City of Cooper City, do you have any pending code violations and/or unpaid code fines related to such property?If yes, please list:
Is there any other information that you would like to disclose in connection with this application?
If yes, please do so here:
Please affirm and acknowledge that you understand and agree to the following (mark each box):
Please affirm and acknowledge that you understand and agree to the following (mark each box): I understand that in accordance with Florida Sunshine Law, this information becomes public record and may be subject to public review.
I understand that in accordance with Florida Sunshine Law, this information becomes public record
I understand that in accordance with Florida Sunshine Law, this information becomes public record and may be subject to public review. If appointed, I agree to faithfully and fully perform the duties of my appointment, will make every endeavor to serve my full term, and will comply with all laws and ordinances of the City of Cooper City, Broward County and the State of Florida, particularly those pertaining to the standards of conduct for public officers and related financial disclosure requirements, if applicable. I further agree to take the applicable statutory oath. I understand that if appointed, I must take the oath of office prescribed in the

.

Please choose one: Please choose one: I wish to be considered by Commissioner (please write in name) I wish to be considered by any member of the Commission Date: 3.4.22 Name: Kevin Greenblatt Home Address: 3600 NW 91st Way. Cell #: (954) 529-6038 Work #: N/A Length of Residence in Cooper City 13 Years 7 Months Length of Time as Business Person in Cooper City 13 Years 7 Months Length of Time as Business Person in Cooper City 13 Years 7 Months Please provide a brief statement outlining why you wish to serve on the applicable boards and/or	City of Cooper City someplace Special	ROWL PALM RANCH PRESERVA MON BOARD CITY OF COOPER CITY CITIZENS RESOURCE SHEET
I wish to be considered by Commissioner	Business Advisory Board Charter Review Board Education Advisory Board	General Employees Public Safety Advisory Board Pension Board Recreation Advisory Board Green Advisory Board Senior Advisory Board Planning & Zoning Board Finance Review Advisory Board
Name: Kevin Greenblatt Email Address: Kevin.Greenblatt@gmail.com Home Address: 3600 NW 91st Way. Cooper City, FL 3302 4 Cell #: (954) 529-6038 Work #: N/A Home #: N/A Length of Residence in Cooper City 13 Years 7 Months Length of Time as Business Person in Cooper City 13 Years 7 Months QUALIFICATIONS: Please provide a brief statement outlining why you wish to serve on the applicable boards and/or committees selected. In addition, please attach copy of your resume or vita (optional): Please See Attached Experience in Board Subject: Related Work or Civic Affiliation: Was on same Board from 2019 - 2021	I wish to be considered b	
Please provide a brief statement outlining why you wish to serve on the applicable boards and/o committees selected. In addition, please attach copy of your resume or vita (optional): Please See Attached Experience in Board Subject: Related Work or Civic Affiliation: Was on same Board from 2019 - 2021	Name: Kevin Greenblat Home Address: 3600 NW Cell #: (954) 529-6038 Length of Residence in Coo	/ 91st Way. Cooper City, FL 3302 4 Work #: N/A Home #: N/A oper City 13 Years 7 Months
Related Work or Civic Affiliation: Was on same Board from 2019 - 2021	Please provide a brief stater committees selected. In addition	on, please attach copy of your resume or vita (optional):
	Related Work or Civic Affilia	tion: Was on same Board from 2019 - 2021

		Other professional or technical training (Name of school, course name, etc.):
		DISCLOSURES:
	1.	Are you or any of your relatives presently employed by the City of Cooper City? NO If yes,
		please state names and City departments/divisions:
	2.	Are you aware of any potential conflict of interest that may arise from your serving on City of Cooper City boards and committees?If yes, please explain:
	3.	Do you have any unpaid or delinquent accounts, water bills, etc. owed to the City of Cooper City? NOIf yes, please list:
4	4.	If you own property in the City of Cooper City, do you have any pending code violations and/or unpaid code fines related to such property? YesIf yes, please list:
4	5.	Is there any other information that you would like to disclose in connection with this application?
		Please affirm and acknowledge that you understand and agree to the following (mark each box):
		and may be subject to public review. If appointed, I agree to faithfully and fully perform the duties of my appointment, will make every endeavor to serve my full term, and will comply with all laws and ordinances of the City of Cooper City, Broward County and the State of Florida, particularly those pertaining to the standards of conduct for public officers and related financial disclosure requirements, if applicable. I further agree to take the applicable statutory oath. I understand that if appointed, I must take the oath of office prescribed in the Florida Statutes.
		Misrepresentation of any information or qualifications given on this application may cause automatic removal from any board committee Signature:
		Signature:

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Cooper City	CITY OF COOPER CITY CITIZENS RESOURCE SHEET
Please indicate the Board(s) fo	r which you wish to be considered:
	Planning & Zoning Board Recreation Advisory Board Public Safety Advisory Board Senior Advisory Board Royal Palm Ranches and Lake Maranatha Preservation Board Commissioner
Date: $9 - 12 - 2019$	ay member of the Commission
Home Address: <u>10030</u> Cell #: <u>954-895-589</u> Length of Residence in Cooper Length of Time as Business Per	Smith Email Address: Gokatgo&load.com N.W. 35th St. Cooper City, FL 33024 3 Work #: Home #: City 26 Years Months rson in Cooper City 25 Years Months
QUALIFICATIONS: Please provide a brief statement	outlining why you wish to serve on the applicable boards and/or
committees selected. In addition, F Serving on the h	blease attach copy of your resume or vita (optional):
me to communic and changing in	the Rayal Falm Rancles area of CapperC
Experience in Board Subject:	
Corrade Chair Person, Vol College (if appropriate): <u>PT A</u> Droward Community's Fort Lawderdale Coll Field of Study: Foodate	Nolunteer Service with Griffin Elementary, Fifth unteer at Pioneer Middle School and Volunteer as Cooperc treasurer at Pioneer Middle chool and Associate Degree in Science, Legal Assistant ege. Paralegal Assistant. (Legal Assistant) in Science in legal Assistant. ining (Name of school, course name, etc.):
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DISCLOSURES:
Are you or any of your relatives presently employed by the City of Cooper City ?
please state names and City departments/divisions: >
Are you aware of any potential conflict of interest that may arise from your serving on City of Cooper City boards and committees? <u>No</u> If yes, please explain:
Do you have any unpaid or delinquent accounts, water bills, etc. owed to the City of Cooper City?
If you own property in the City of Cooper City, do you have any pending code violations and/or unpaid code fines related to such property?If yes, please list:
If yes, please do so here:
Please affirm and acknowledge that you understand and agree to the following (mark each box):
I understand that in accordance with Florida Sunshine Law, this information becomes public record and may be subject to public review.
If appointed, I agree to faithfully and fully perform the duties of my appointment, will make every endeavor to serve my full term, and will comply with all laws and ordinances of the City of Cooper City, Broward County and the State of Florida, particularly those pertaining to the standards of conduct for public officers and related financial disclosure requirements, if applicable. I further agree to take the applicable statutory oath. I understand that if appointed, I must take the oath of office prescribed in the Florida Statutes.
Misrepresentation of any information or qualifications given on this application may cause automatic removal from any board/committee
Signature: A-12-201 20.21 7-23-21

CITIZE COOPSEINS Please indicate the Board(s) for which you wish to b Business Advisory Board Charter Review Board Charter Revi	es Public Safety Advisory Board Recreation Advisory Board Board Senior Advisory Board Ig Board Finance Review Advisory Board ward Securation Board (please write in name)
N NITE AND A NEW YORK	Email Address: dsweet1224@gmail.com
Home Address:	Cooper City, FL 33024
Cell #. Work #: Work #:	Home #:
Length of Residence in Cooper City <u>35</u> Years	
Length of Time as Business Person in Cooper City	N/A Years Months
QUALIFICATIONS:	an a chan sana chana chan ann an
Please provide a brief statement outlining why you committees selected. In addition, please attach copy of y I am interested in being instrumental in helping my comm	our resume or vita (optional):
I've been in public service for over 20 years and love my comn	nunity. I look forward to helping in this capacity.
Experience in Board Subject:	
and the second of the statement of the second statement of the statement o	(Davie Fire Rescue)

	DISCLOSURES:
	Are you or any of your relatives presently employed by the City of Cooper City? NO If yes,
	please state names and City departments/divisions:
•	Are you aware of any potential conflict of interest that may arise from your serving on City of Cooper City boards and committees? NoIf yes, please explain:
•	Do you have any unpaid or delinquent accounts, water bills, etc. owed to the City of Cooper City? NO If yes, please list:
•	If you own property in the City of Cooper City, do you have any pending code violations and/or unpaid code fines related to such property? NoIf yes, please list:
•	Is there any other information that you would like to disclose in connection with this application? <u>No</u> If yes, please do so here:
•	If yes, please do so here: Please affirm and acknowledge that you understand and agree to the following (mark each box): I understand that in accordance with Florida Sunshine Law, this information becomes public record
	If yes, please do so here: Please affirm and acknowledge that you understand and agree to the following (mark each box):

CITY OF COOPer City Please indicate the Board(s) for	CITY OF COOPER CITY CITIZENS RESOURCE SHEET which you wish to be considered:
Business Advisory Board Charter Review Board Education Advisory Board Firefighters Pension Board Royal Palm Ranches Preservation Please choose one:	General Employees Pension Board Mental Health & Wellness Advisory Board Green Advisory Board Recreation Advisory Board Planning & Zoning Board Senior Advisory Board Police Pension Board Finance Review Advisory Board
I wish to be considered by any	y member of the Commission
Home Address: 9801 NW 35 Cell #:954-557-6207 Length of Residence in Cooper C	Email Address: scottrzucker@gmail.com th St. Cooper City, FL Work #: 954-523-2020 Home #: N/A City 3 Years 0 Months Months
committees selected. In addition, pl I would like to serve on the Royal Palm Rand	outlining why you wish to serve on the applicable boards and/or ease attach copy of your resume or vita (optional):
Experience in Board Subject: Related Work or Civic Affiliation:	Civil Liligation Attorney: I serve on the Board of the B'nai Brith Justice Lodge and have prior board service.

	Other professional or technical training (Name of school, course name, etc.):
	DISCLOSURES:
	Are you or any of your relatives presently employed by the City of Cooper City? NO If yes,
	please state names and City departments/divisions:
•	Are you aware of any potential conflict of interest that may arise from your serving on City of Cooper City boards and committees? NoIf yes, please explain:
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	Is there any other information that you would like to disclose in connection with this application? No.
	Please affirm and acknowledge that you understand and agree to the following (mark each box):
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	Misrepresentation of any information or qualifications given on this application may cause automatic removal from any board/committee.
	Signature: Date: 8 2 4 2 3
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