



Town of Cape Carteret
Board of Adjustment Application

Name: _____

Street Address: _____

Mailing Address: _____

Telephone Number: _____

E-mail Address: _____

Current Occupation: _____

Current Employer: _____

Education: _____

Professional Certifications: _____

How many years have you lived in Cape Carteret? _____

Are you a registered voter in Carteret County? _____

Are you currently serving, or have you ever served on a public board or commission?

Yes _____ No _____

If yes, please provide details below:

Please explain any anticipated conflict of interest or scheduling difficulties that you may have if you are appointed to serve on the Board of Adjustment:



Town of Cape Carteret
Board of Adjustment Application

Please state any personal, occupational, or previous experience that you feel might be pertinent so serving on the Board of Adjustment:

Please state your interest in serving on the Board of Adjustment:

Applicants are encouraged to attach a copy of their resume to this application.

Board of Adjustment appointments take place at the regular Board of Commissioners meeting in February. Please submit all applications by close of business on the first Friday in February. You can email your application to hleffingwell@capecarteret.org, drop the application off at Town Hall, or mail your application to 102 Dolphin Street, Cape Carteret, NC 28584.

Please note that upon appointment to a Board or Committee, the information contained herein becomes a matter of public record pursuant to NCGS 132-1