SPECIAL MAGISTRATE APPLICATION

BAY COUNTY VALUE ADJUSTMENT BOARD

PLEASE TYPE OR PRINT. IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS. INCOMPLETE APPLICATIONS WILL BE RETURNED.

NAME:	
HOME ADDRESS:	
HOME PHONE #:	
CELL PHONE #:	
BUSINESS NAME:	
BUSINESS ADDRESS:	
BUSINESS PHONE #:	
BUSINESS FAX #:	
E-MAIL ADDRESS:	

IMPORTANT: A resume may be submitted along with the application **but it cannot be used in lieu of an application.**

NOTE: Your selection as special magistrate does not ensure that you will be scheduled to serve any particular number of days or hear any particular type or number of cases. The Board reserves the right to schedule special magistrates in its absolute discretion, which may result in some special magistrates serving more than others.

1. Are you an elected or appointed official or employee of the county? _____

2. Are you an elected or appointed official or employee of a taxing jurisdiction or of the State? _____

3. If you are chosen to serve, you must not represent any party before the board in any administrative review of property taxes. _____I agree (please initial)

4. **(Attorney Magistrate Applicants Only)**

   I am a member of the Florida Bar with no less than five years experience in the area of ad valorem taxation and have received training provided by the Florida Department of Revenue. _____

   --OR—

   I am a member of the Florida Bar with no less than three years of such experience and have completed training provided by the Florida Department of Revenue. _____

5. **(Appraiser Magistrate Applicants Only)**

   I am a state certified real estate appraiser with not less than five years experience in real property valuation and have received training provided by the Florida Department of Revenue. _____

   --OR—

   I am a state certified real estate appraiser with no less than three years of such experience and have completed training provided by the Florida Department of Revenue. _____

   I affirm that I am certified under Florida Statute Chapter 475, Part II _____Yes (please initial)

6. **(Tangible Appraiser Magistrate Applicants Only)**

   I am a designated member of a nationally recognized appraiser's organization with not less than five years experience in tangible personal property valuation and have received training provided by the Florida Department of Revenue. _____

   --OR—

   I am a designated member of a nationally recognized appraiser's organization with no less than three years of such experience and have completed training provided by the Florida Department of Revenue. _____

7. I have attended or received an annual training program provided by the Florida Department of Revenue; receipt of training is attached. _____

8. Have you previously been appointed as a special magistrate in the last five (5) years? _____

   If yes, indicate below the county(ies) and specific year(s) you served:

COUNTY(IES)	**YEAR(S)**

9. Do you have experience in the computer program AXIA, which is used by the Bay County VAB? _____

10. Have you ever been convicted of a crime, been a party to or attorney on any legal action against the property appraiser, tax collector or Bay County, been disbarred, suspended or had any other disciplinary action against you from any organized Bar Association, any action that would have otherwise prevented you from conducting broker or appraisal services, or been disciplined by a professional or regulatory body? ____

    IF YES, Please Explain:

    _____
    _____
    _____
    _____

If applying to hear issues regarding the valuation of real estate, please provide the following:

Are you a certified residential appraiser? _____

Are you a certified general appraiser? _____

License number: _____

License status (Current/Active, Voided, Etc): _____

License expiration Date: _____

Circle the professional designation(s) that you have: MAI SRA SRPA

Number of years experience in real property valuation: _____

If applying to hear issues regarding the valuation of tangible personal property, please provide the following:

The name of the nationally recognized appraiser's organization that you are a designated member of:

_____

License number: _____

License status (Current/Active, Voided, etc): _____

License expiration date: _____

Number of years experience in personal property valuation: _____

Professional designations that you have: _____

If applying for the position of Attorney Magistrate please provide the following:

Bar Number: _____

Date of Admission: _____

Are you a member in good standing eligible to practice in Florida? _____

Area of certification: _____

Number of years experience in the area of ad valorem taxation: _____

Professional memberships and designations: _____
_____

Please attach copies of all active licenses and certifications including professional designations and DOR Special Magistrate training.

The undersigned certifies, under penalty of disqualification from consideration, that each item contained in this application, or in any other document furnished by or on behalf of the applicant is true and complete as of the date bears. The undersigned authorizes the Bay County Value Adjustment Board to investigate any source provided herein or obtain information from other sources to verify each item contained herein. The undersigned acknowledges that if selected he/she will follow all requirements and mandates of law in fulfilling the duties of special magistrate to the Bay County Value Adjustment Board.

_____ _____

Applicant Signature Date

Qualified individuals wishing to serve should complete this application and submit it on or before: **June 1, 2012**

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT: DeAnna Lockamy, VAB Clerk, at (850) 767-3314