



VILLAGE OF MARVIN

10004 New Town Road | Marvin, NC | 28173 | Tel: (704) 843-1680 | Fax: (704) 843-1660 | www.marvinnc.org

Application for Vacant Council Seat

Name: _____

Address: _____

Subdivision: _____ Are you a resident of Marvin? _____

Years as resident of Marvin: _____ Phone: _____

Office/cell: _____ Fax: _____ Email: _____

Education: _____ Occupation: _____

Please list your area(s) of Expertise and Interest/Skills and describe how your background will benefit the Council:

Briefly describe the community planning issue that concerns you the most:

How would you propose addressing the issue that concerns you the most?

What is your long term vision for the Village of Marvin?

The Council meets twice per month (the meeting schedule is available from the Clerk). Attendance at meetings is important, not only to establish a quorum but also for the operation of the Village. Will you be able to participate in the majority of the meetings?

**The applicant understands and agrees that he or she must submit the prescribed Conflict of Interest Form with this application. All information provided in the Conflict of Interest Form is considered a matter of public record and is therefore subject to disclosure and copying upon request.*

Date: _____ Signature: _____

Note: Information provided in this application is considered a matter of public record. It may, therefore, be subject to disclosure upon request pursuant to North Carolina's Public Records Law. N.C.G.S., Section 132-1, et seq.

Return to: Village Clerk, Village of Marvin, 10004 New Town Rd, Marvin, NC 28173, Fax: 704-843-1660,
Email: clerk@marvinnc.org

Village of Marvin Conflict of Interest Form

Is there any possible conflict of interest as defined in the North Carolina State Statute G.S. 160A-381(d)* that would create problems or prevent you from fairly and impartially discharging your duties as an appointee of any Village of Marvin board?

Yes: _____ No: _____ (If yes, explain conflict)

***GS 160A381(d)** A City council member shall not vote on any zoning map or text amendment where the outcome of the matter being considered is reasonably likely to have a direct, substantial, and readily identifiable financial impact on the member. Members of appointed boards providing advice to the city council shall not vote on recommendations regarding any zoning map or text amendment where the outcome of the matter being considered is reasonably likely to have a direct, substantial, and readily identifiable financial impact on the member.

1. Have you ever been employed by and/or been a paid representative of any corporation, company, LLC, LLP, partnership, or any other organizations operating and/or doing business in the Village of Marvin, North Carolina and/or its sphere of influence.

2. Please list any ownership by yourself or any member of your immediate family, in any and all corporations, companies, LLC's, LLP's, partnerships, or any other organizations operating and/or doing business in the Village of Marvin, North Carolina and/or its sphere of influence.

3. List all real estate in the Village of Marvin, North Carolina and/or its sphere of influence owned, in whole or in part, by yourself or any member of your immediate family, including any property leased for ten (10) years or more and/or property on which an option for purchase is held, excluding your primary residence.

If appointed, Applicant must provide updates to this Form as necessary within ten (10) business days of a change in the above provided information.

OATH OR AFFIRMATION

I, _____, hereby swear or affirm that I have fully read and understand this Conflict of Interest Form (the "Form") and that the information provided on the Form, as well as any attachments, is true, correct and complete to the best of my knowledge and belief. I also swear or affirm that I have not transferred, and will not transfer, any asset, interest, or property, while retaining an equitable interest, for the purpose of concealing this information from disclosure under the Form. I understand and agree that failure to fully disclose any required information on the Form, failure to supplement any relevant information, or falsification of information on the Form shall constitute cause for which I may be removed from any appointed Village position. I further understand and agree that all of the information provided in the Form, including all attachments, may be considered a matter of public record and may therefore be subject to disclosure and copying upon request pursuant to North Carolina's Public Record Laws, N.C. Gen. Stat. § 132-1, *et. seq.*

Signature of Person Filing

Printed Name of Person Filing

STATE OF NORTH CAROLINA
COUNTY OF UNION
VILLAGE OF MARVIN

Signed and sworn to or affirmed before me this day by _____
(Name of Person Filing)

Date: _____

Official Signature of Village Clerk or Deputy Clerk

Clerk's printed or typed name: _____

(Village Seal)