PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS BOARD APPOINTMENT SUMMARY

Meeting Date: October 2, 2007

Department: Submitted By: Office of Financial Management & Budget

Advisory Board Name: Impact Fee Review Committee

I. Executive Brief

Motion and Title: Staff recommends motion to approve: the reappointment/ appointment of the following individuals to the Impact Fee Review Committee for the time period October 1, 2007, through September 30, 2010.

<u>Nominee</u>	Seat No.	<u>Requirement</u>
Reappoint:		
Nancy Hogan	2	Municipal
E. Llwyd Ecclestone, III	5	Business
Joseph Pollock	6	Business
Arnold Broussard	7	At-Large
Bruce Malasky	Alternate	Business
Dennis Thomas	Alternate	At-Large
Appoint:		
Robert Gottlieb	1	Municipal
Matty Mattioli	3	Municipal
Jeffrey Natftal	Alternate	Municipal

Summary: The Impact Fee Review Committee is composed of seven (7) members and three (3) alternate members appointed by the BCC. The membership of the committee includes three (3) representatives from municipalities, three (3) representatives from the business community, and one (1) member selected at-large. The alternate members include one (1) representative from each of the categories above. An alternate member shall be authorized to vote in place of an absent voting member appointed from the same category and shall count toward a quorum. This agenda item provides for the reappointment/ appointment of six (6) regular members and three (3) alternate members to three-year terms expiring September 30, 2010. Seat No. 4 is vacant and will be filled at a later date. Countywide (LB)

Background and Policy Issues: Article 17 of the Unified Land Development Code provides for an Impact Fee Review Committee. Impact Fee Review Committee members must be qualified electors of Palm Beach County for two years prior to appointment. (Continued on Page 3)

Attachments: Advisory Board Nominee Information Forms (9 pages)

Recommended by	: Cremare (Coput () 9/13/07			
	Department Director	Date		
Approved By:	· Much Dr	1/18/0-		
	Assistant County Attorney	Date		

(Continued from Page 1)

The Impact Fee Review Committee is required to submit a report to the Board of County Commissioners regarding the implementation of Article 13 (Impact Fees), levels of service for impact fees exacted under Article 13, impact fee revenues and expenditures pursuant to Article 13 and recommended amendments to Article 13; reviews all amendments to Article 13 prior to their consideration by the Board of County Commissioners; and the performance of such other duties as the Board of County Commissioners deems appropriate.

Part I:

Board Name: <u>Impact 1</u>	Fee Review Commit	<u>ttee</u>		<u> </u>		
[X] At Large Ap	pointment	or	[] District	Appoint	ment	
Term of Appointment:	3 Years.	From:	10/01/2007	Т	o: <u>09/30/2010</u>	
Seat Requirement: Mur	nicipal			S	eat #: _2	
[X]*Reappointme	ent	or	[] New Ap	pointme	nt	
or [] to complete a term of	the		Due to:	[] re	esignation [] o	ther
Completion of term to expire on:						
Part II: APPLICA	ANT, UNLESS EXE	EMPTED, M	UST BE A C	OUNTY	RESIDENT	
Name: Hogan		Nanc	v		L	
1108	Last	114110	First		Middle	
	Realtor / Commiss	ioner, Town	of Ocean Rid	ge		
Occupation/Affiliation:	Nancy L. Hogan R	ealty and Set				
Business Name:				·		
Business Address:	2500 Quantum Lak	ces Dr				
	Boynton Beach, FI	············	~	G . 1	33426	
City & State			Zıp	Code:		
Residence Address:	37 Hibiscus Way					
Residence Address;	Ocean Ridge, FL	<u></u>			33435	-
City & State			Zip	Code:		
Home Phone: (56	1)732-5581	Busir	ness Phone:	(561)70	3-7901 E	xt.
Cell Phone: ()	Fax:	-	()		<u></u>
Email Address: <u>nanc</u>	y@hogan-s.com					
Mailing Address prefer	ence: [X] Business	s Address [] Residence			
Minority Identification [] IF (Native-American [] AF (Asian-American [] BF (African-American [] HF (Hispanic-American [X] WF (Caucasian Females)	n Female) Female) In Female) In Female) In Female)	[] AM (Asi [] BM (Afr [] HM (Hisp	ive-American an-American ican-America panic-America icasian Male)	Male) n Male) m Male)	fale)	
Part III: COMMISSIO	ONER COMMENT	'S				
Appointment to be made	at BCC Meeting on:	10/02/2	2007		<u> </u>	
*When a person is bein conflicts shall be consid					vious disclosed voti	ng
Number of prev	viously disclosed vot	ing conflicts	during the pro	evious te	m	
Signature:	····		Date	»:		
Pursuant to Florida's Publicand photocopied by member		ocument may l	oe reviewed		Revised 6/2007	

Part I:

Board Name: <u>Impact</u>]	Fee Review Comn	<u>nittee</u>			
[X] At Large Ap	pointment	or	[] District A	Appointment
Term of Appointment:	3 Years.	Fr	om: <u>1</u>	0/01/2007	To: 09/30/2010
Seat Requirement: Bus	iness			·	Seat #:5
[X]*Reappointm	ent	or	[] New App	ointment
or [] to complete term of	the			-] resignation [] other
Completion of term to expire on:					
Part II: APPLICA	ANT, UNLESS EX	KEMPTI	ED, MUS	T BE A CO	UNTY RESIDENT
Name: Ecclestone III			E		Llwyd
	Last			First	Middle
Occupation/Affiliation:	Home Builder				
Business Name:	Signature Homes	}			
	357 Hiatt Drive				
Business Address:	Palm Beach Gard	lens. FL	<u> </u>		33418
City & State		,		Zip (Code:
Residence Address:	<u></u>				
City & State	-			Zip (Code:
Home Phone: ()		Business	s Phone:	(561)627-1270 Ext.
Cell Phone:)		Fax:	_()
Email Address:					
Mailing Address prefer	ence: [X]Busine	ess Addr	ess []	Residence	
Minority Identification [] IF (Native-American [] AF (Asian-American [] BF (African-American [] HF (Hispanic-Americ [] WF (Caucasian Female	n Female) Female) an Female) can Female)	[] AM [] BM [] HM	M (Asian- A (Africa: I (Hispan	American In American M n-American ic-American sian Male)	íale) Male)
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Part I:

Board Name: <u>Impact F</u>	ee Review Committee		
[X] At Large App	pointment or	[] Distric	t Appointment
Term of Appointment: _3	Years. Fi	rom: <u>10/01/2007</u>	7 To: _09/30/2010
Seat Requirement: Busin	iess		Seat #: 6
[X]*Reappointme	ent or	[] New A ₁	pointment
or [] to complete the term of Completion of term to expire on:	1è	Due to:	[] Resignatio [] other n
	NT, UNLESS EXEMPT	ED, MUST BE A C	COUNTY RESIDENT
Name: Pollock		Joe	
	Last	First	Middle
Occupation/Affiliation:	Professional Engineer		
Business Name:	Kimley-Horn & Assoc		
Business Address:	4431 Embarcadero Dr.,		
City & State	West Palm Beach, FL	Zi	33418 p Code:
-			
Residence Address:			
City & State		Zi	p Code:
Home Phone: ()		Business Phone:	(561)845-0665 Ext.
Cell Phone:)	Fax:	()
Email Address: joeber	@bellsouth.net		
Mailing Address prefere	nce: [X] Business Addr	ess [] Residence	
Minority Identification ([] IF (Native-American I [] AF (Asian-American I [] BF (African-American I [] HF (Hispanic-American I [] WF (Caucasian Female	Female) [] IM Female) [] AN n Female) [] BN an Female) [] HM	I (Native-American M (Asian-American M (African-America I (Hispanic-Americ M (Caucasian Male	Male) m Male) an Male)
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Signature:	_		e:

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Part I:

Board Name: Impact F	ee Review Committee		
[X] At Large Ap	pointment or	[] District Appo	intment
Term of Appointment:	Years. Fr	om: <u>10/01/2007</u>	To: <u>09/30/2010</u>
Seat Requirement: At L	arge		Seat #: _7
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Part II: APPLICA	ANT, UNLESS EXEMPTE	ED, MUST BE A COUNT	TY RESIDENT
Name: Broussard		Arnold) f 131
	Last	First	Middle
Occupation/Affiliation:	Consulting		
Business Name:	Palm Beach Consulting		
Business Address:			
City & State		Zip Code	: :
	6406 Blue Bay Circle		
Residence Address:			
City & State	Lake Worth, FL	Zip Code	33467 e:
Home Phone: (56)	1)	Business Phone: ()	Ext.
Cell Phone: ()	Fax: ()	
Email Address: abrou	ssard@palmbeachconsulti	ng.com	
Mailing Address prefere	ence: [] Business Addres	ss [] Residence	
Minority Identification [] IF (Native-American [] AF (Asian-American [] BF (African-America [] HF (Hispanic-Americ [] WF (Caucasian Femal	Female) [] IM Female) [] AN n Female) [X] BN an Female) [] HM	(Native-American Indian M (Asian-American Male) M (African-American Mal M (Hispanic-American Ma M (Caucasian Male)) le)
Part III: COMMISSIO	ONER COMMENTS		
Appointment to be made	at BCC Meeting on: 1	0/02/2007	
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Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Part I:

Board Name: Impact I	ee Review Comm	<u>ittee</u>			····-
[X] At Large Ap	pointment	or	[] Distric	t Appointme	nt
Term of Appointment:	3 Years.	From:	10/01/2007	To:	09/30/2010
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Part II: APPLICA	ANT, UNLESS EX	EMPTED, M	UST BE A C	OUNTY RE	SIDENT
Name: Malasky	Last	Bruce	First	,	Middle
Occupation/Affiliation:	Real Estate Devel	oper			
Business Name:	DCM & Associate				
Business Address:	1300 N. Florida M	Iango Rd., Ste	. 15		
City & State	West Palm Beach , FL Zip Code:				
Residence Address:	2341 Tecumseh D West Palm Beach	***		G 1	33409
City & State			Z ₁	p Code:	
Home Phone: (56	1)683-3379	Busin	ess Phone:	(561)471-8	8600 Ext
Cell Phone:)	Fax:		()	
Email Address: bruce	@malaskyhomes.c	om			
Mailing Address prefer	ence: [X] Busine	ss Address [] Residence	;	
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Part III: COMMISSIO	ONER COMMEN	TS			
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Signature:			Dat	e:	

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Part I:

Board Name: Impact	Fee Review Committee		
[X] At Large Ap	opointment or	[] Distric	et Appointment
Term of Appointment:	3 Years. Fr	om: 10/01/200	7 To: <u>09/30/2010</u>
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or [] to complete term of Completion of term to expire on:	the	Due to:	[] Resignatio [] other
Part II: APPLICA	ANT, UNLESS EXEMPT	ED, MUST BE A	COUNTY RESIDENT
Name: Thomas		Dennis	
	Last	First	Middle
Occupation/Affiliation:	Engineering Consulting		
Business Name:	Miller Legg		•
	2005 Vista Parkway, Ste.	100	
Business Address:	West Palm Beach, FL		33411
City & State	.,	Z	ip Code:
Residence Address: City & State	14398 Black Perry Dr., W West Palm Beach, FL	7	33414 ip Code:
•			-
Home Phone: (56	1)798-8485	Business Phone:	(561)689-1138 Ext.
Cell Phone: ()	Fax:	()
Email Address: dthor	nas@millerlegg.com		
Mailing Address prefer	ence: [X] Business Addr	ess []Residence	e
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Part I:

Board Name: Impact I	ee Review Comm	ittee			
[X] At Large Ap	pointment	or	[] District	Appointment	
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Part II: APPLICA	ANT, UNLESS EX	EMPTED, M	UST BE A C	OUNTY RESIDENT	
Name: Gottlieb		Rober	rt		
	Last		First	Midd	lle
Occupation/Affiliation:	South Palm Beach	h Councillor			
Business Name:	Town of South Pa	alm Beach			
	3577 S. Ocean Bl	vd			
Business Address:	South Palm Beach	h, FL		33480	
City & State		<u></u>	Zip	Code:	
Residence Address:	3589 S. Ocean Bl	vd			
City & State	South Palm Beach	h, FL	Zip	33480 Code:	
Home Phone: (56	1)582-5969	Busin	ess Phone:	(561)588-8889	Ext.
Cell Phone: ()	Fax:		(_)	
Email Address: Rgot	tlieb1@aol.com				
Mailing Address prefer	ence: [X]Busine	ss Address [] Residence		
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Part III: COMMISSIO	ONER COMMEN	TS			
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Part I:

Board Name: Impact	Fee Review Comm	<u>iittee</u>					
[X] At Large A	ppointment	or	[] Distric	t Appointment			
Term of Appointment:	3 Years.	From	: <u>10/01/200</u>	7 To: <u>09/30</u>	0/2010		
Seat Requirement: Mu:	nicipal			Seat #: _3	<u> </u>		
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O [] to complete r term of Completion of term to expire on:	the		Due to:	[] resignation	[] other		
Part II: APPLIC	ANT, UNLESS EX	(EMPTED)	, MUST BE A C	COUNTY RESIDE	NT		
Name: Mattioli	Last	M	atty First		Middle		
Occupation/Affiliation:	Council Member,	, Royal Palı					
Business Name:	Village of Royal	Village of Royal Palm Beach					
Business Address:	1050 Royal Palm	Beach Blv	d				
City & State	Royal Palm Beach, FL 33411 Zip Code:						
Residence Address:	12018 Greenway		t. 103		·		
City & State	Royal Palm Beac	h, FL	Zi	33411 p Code:	I		
Home Phone: (56	51)793-2405	Br	usiness Phone:	(561)790-5103	Ext.		
Cell Phone: (56	51)315-6384	Fa	ıx:				
Email Address: <u>matt</u>	iolim@comcast.net						
Mailing Address prefer	rence: [X] Busine	ess Address	[] Residence	;			
Minority Identification [] IF (Native-American [] AF (Asian-American [] BF (African-American [] HF (Hispanic-Ameri [] WF (Caucasian Females	n Female) 1 Female) an Female) can Female)	[] AM ([] BM ([] HM (F	Native-Americar Asian-Americar African-America Hispanic-Americ (Caucasian Mal	n Male) an Male) can Male)			
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Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Part I:

Board Name: _Impact]	Fee Review Comn	<u>nittee</u>				
[X] At Large Ap	pointment	or	[] Distri	et Appoint	ment	
Term of Appointment:	3 Years.	From	m: <u>10/01/200</u>	7 T	o: <u>09/30/2010</u>	
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or [] to complete term of Completion of term to expire on:	the		Due to:	[] re	esignation []	other
Part II: APPLIC	ANT, UNLESS EX	KEMPTEI	D, MUST BE A	- COUNTY	RESIDENT	
Name: Naftal		J	effrey			
	Last		First		Middle	
Occupation/Affiliation: Business Name:	Town Manager, Town of Juno Be		uno Beach			
Business Name.	340 Ocean Dr					
Business Address:						
City & State	Juno Beach, FL		Z	ip Code:	33408	
Residence Address:	9103 Green Mea		,			
City & State	Palm Beach Gard	lens, FL	Z	ip Code:	33408	
Home Phone: (56	1)630-4490	I	Business Phone:	(561)62	6-1122	Ext.
Cell Phone: ()	F	Fax:	(561)77	5-0812	
Email Address: <u>inaft</u>	al@juno-beach.fl.u	<u>ıs</u>				
Mailing Address prefer	ence: [X] Busine	ess Addres	s [] Residenc	e		
Minority Identification [] IF (Native-American [] AF (Asian-American [] BF (African-American [] HF (Hispanic-American [] WF (Caucasian Females)	n Female) Female) In Female) Can Female)	[] AM [] BM [] HM (Native-America (Asian-America (African-Americ (Hispanic-Ameri (Caucasian Mal	n Male) can Male) can Male)	[ale)	
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