

# The Town of Spring Lake



Chartered in 1951

300 Ruth Street, P.O. Box 617  
Fax (910) 436 - 2667

Spring Lake, NC 28390-0617  
Website: [www.spring-lake.org](http://www.spring-lake.org)

Telephone: (910) 436 - 0241

## APPLICATION FOR BOARD OF ADJUSTMENT

All information provided on this application is public information and may be shared with others upon request.

Mr.  Mrs.  Ms. \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you live inside the city limits of Spring Lake?  yes  no

Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Are you currently serving on a Board of the Town of Spring Lake?  yes  no

If so, what is the name(s) of the Board(s)? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Why do you wish to serve the Town in this capacity? (If additional space is needed, please attach a separate sheet) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Employment

Please list the name and address of your current employer, the title of your current position and a brief description of your job duties.

Name of Employer: \_\_\_\_\_

Address : \_\_\_\_\_

Description of job duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Civic Involvement: Please list the names of all civic organizations in which you currently hold membership. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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Board of Alderman Approved Appointment  yes  no

\_\_\_\_\_  
Date

\_\_\_\_\_  
Term of Appointment

\_\_\_\_\_  
Signature of Town of Clerk

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