

To Board Chairs: Please summarize applications as received; contact each applicant for any update one year after last contact; when positions are open, invite each applicant to attend a board meeting prior to making a recommendation.

ADVISORY BOARD NAME: Planning Board

Name: JACK HUGGETY

Date of application/last contact: 12-12-14

Summary of qualifications:

APPEALANCE COMMISSION, MEMBER AND CHAIR

**Advisory Board Chair reconfirmed applicant's interest in serving by phone or e-mail.**

☒ Yes ☐ No (Briefly explain: \_\_\_\_\_)

**Applicant attended Advisory Board meeting prior to BOA review.**

☒ Yes (Date: \_\_\_\_\_) ☐ No  
Briefly explain:

**Applicant has demonstrated a clear understanding of the time commitment, roles and responsibilities of serving on the Advisory Board.**

☒ Yes ☐ No  
Briefly explain:

**In addition to your comments above, please check other qualities that the applicant offers that would help the Advisory Board meet its goals for community representation. Please**

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***note that candidates who do not meet any of these qualities are still eligible for appointment. Please communicate any urgent needs and priorities for Advisory Board composition to your Board of Aldermen Liaison.***

☐ Gender diversity

☐ Racial or ethnic diversity

☐ Age range diversity

☐ Neighborhood/geographic diversity

☐ Occupation, experience or special skills

☒ Previous public service or community involvement

☐ Other: Appraisal Commission

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Name: THOMAS J. GEMANN

Date of application/last contact: \_\_\_\_\_

**Summary of qualifications:**

PAST MEMBER OF HILLSBOUROUGH BOARD OF  
ADJUSTMENT

**Advisory Board Chair reconfirmed applicant's interest in serving by phone or e-mail.**

\_\_\_\_ Yes    ☒ No (Briefly  
explain: \_\_\_\_\_)

**Applicant attended Advisory Board meeting prior to BOA review.**

\_\_\_\_ Yes (Date: \_\_\_\_\_)    ☒ No (Briefly  
explain: APPLICATION TOO LATE TO ATTEND LAST BOARD MEETING)

**Applicant has demonstrated a clear understanding of the time commitment, roles and responsibilities of serving on the Advisory Board.**

☒ Yes    \_\_\_\_ No  
Briefly explain:

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☐ Other: \_\_\_\_\_

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**Name:** THOMAS TIEMAN  
**Date of application/last contact:** 3/19/15  
**Summary of qualifications:**

**Advisory Board Chair reconfirmed applicant's interest in serving by phone or e-mail.**

☒ Yes    ☐ No (Briefly explain: \_\_\_\_\_)

**Applicant attended Advisory Board meeting prior to BOA review.**

☒ Yes (Date: 3/19/15)    ☐ No (Briefly explain: \_\_\_\_\_)

**Applicant has demonstrated a clear understanding of the time commitment, roles and responsibilities of serving on the Advisory Board.**

☒ Yes    ☐ No  
Briefly explain:

**In addition to your comments above, please check other qualities that the applicant offers that would help the Advisory Board meet its goals for community representation. *Please note that candidates who do not meet any of these qualities are still eligible for appointment.* Please communicate any urgent needs and priorities for Advisory Board composition to your Board of Aldermen Liaison.**

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☐ Other: \_\_\_\_\_