

Print

Advisory Board Chair Report (Complete One Per Applicant) - Submission #5340

Date Submitted: 4/21/2021

Advisory Board Name:*

Adjustment Board

Chair Name*

Brian Hageman

Applicant First Name:*

Thomas

Applicant Last Name:

Tieman

1. Has the applicant previously served on this or another advisory board?*

☐

Yes

☒

No

2. If yes, how many total years have they served?

This should be available on the application or by asking the applicant.

3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?

☐

Yes (Skip to Last Question)

☒

No

4. Is the applicant already serving on this advisory board and completed their two full terms?

☐

Yes

☒

No

5. Is the applicant applying for a special or expert seat on the advisory board?*

☐

Yes

☒

No

6. If yes, which seat?

7. Did the applicant attend an advisory board meeting?*

☒

Yes

☐

No

8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?

☐

Yes

☒

No

9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on the advisory board:

- ☒
- Yes
- ☐
- No

10. If no, briefly explain:

11. 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 Town Council liaison.

- ☐
- Diversity
- ☐
- Occupation, Experience, or Special Skills
- ☐
- Other

If other, please explain:

Print

Advisory Board Application - Submission #5117

Date Submitted: 1/2/2021

First Name*

Thomas

Last Name*

Tiemann

Date*

1/2/2021

Select today's date

Address1*

100 Stable Rd

Address2

City*

Carrboro

State

NC

Zip*

27510

Is this address located within the corporate limits of the Town of Carrboro?*

Yes

Please select Yes or No.

Is this address located within the Town's ETJ, Planning Jurisdiction, or Northern Transition Area?*

Planning Jurisdiction

Telephone (111)-111-1111*

9196362283

Please enter your primary contact phone number.

Email Address*

tiemann@elon.edu

Enter your primary email address.

The demographic information provided below is of interest because your elected officials want the Town's advisory boards to reflect the diversity of the Town. Diversity of the applicant pool is a priority of the Board.

Current Age*

8/13/1977

Race*

White

Please enter your race.

Sex*

Male

Please enter your sex.

Occupation*

Retired

Please enter your occupation.

Are you a registered Orange County Voter?*

Yes

Please answer Yes or No

Length of Residence in Orange County*

28 years

How long have you been a resident of Orange County?

Length of Residence in the Town of Carrboro*

20 years

How long have you been a resident of the Town of Carrboro?

I wish to be considered for appointment to the following committee/board(s) (Select no more than two (2)):

- | | |
|---|--|
| <input type="checkbox"/> Affordable Housing Advisory Commission | <input type="checkbox"/> Greenways Commission |
| <input type="checkbox"/> Appearance Commission/NPDC | <input type="checkbox"/> Northern Transition Area Advisory Committee |
| <input type="checkbox"/> Arts Committee | <input type="checkbox"/> OWASA Board of Directors |
| <input checked="" type="checkbox"/> Board of Adjustment | <input checked="" type="checkbox"/> Planning Board |
| <input type="checkbox"/> Climate Action Team | <input type="checkbox"/> Recreation and Parks Commission |
| <input type="checkbox"/> Economic Sustainability Commission | <input type="checkbox"/> Stormwater Advisory Commission |
| <input type="checkbox"/> Environmental Advisory Board | <input type="checkbox"/> Tourism Development Authority* |
| <input type="checkbox"/> Human Services Commission | <input type="checkbox"/> Transportation Advisory Board |

Please note that membership is limited to one advisory board at a time. You shall not be considered for appointment to another board unless you resign before filing an application or you are in the last six months of your current term.

Other (advisory board not listed):

Please indicate by typing the advisory board that you are applying for.

****Employer/Self Employed**

Retired

Please enter your employment information. This is a requirement for application for the Tourism Development Authority.

Advisory Board Preference*

Board of Adjustment

Please indicate your preference by typing your first choice. Please limit your selection above to two boards).

Number of Years Employed

5 years since retired

Enter the number of years you have been employed at the organization listed to the left.

**** Provide examples of how you are involved in the promotion of travel and tourism in the Town of Carrboro.**

Required only for the Tourism Development Authority Application.

Community Activities/Organizational Memberships*

Past member and past chair of Carrboro Planning Board. Past member and chair of Hillsborough Board of Adjustment

Please enter the requested information.

Relevant Experience:*

Past service (see above). Retired economist with strength in urban economics.

Reasons You Wish to be Appointed*

Help keep and improve livability of Carrboro

We believe as a Town and as a Town Council that racial equity and diversity and inclusion are important. Please tell us your thoughts about this and why they are important not only in advisory board/commission work but also in all facets of local government and community work.*

In any policy making body it is important that voices be heard from many parts of the community represented.

Have you ever served on any Town of Carrboro Committee or Board?*

If yes, which one(s)?

Planning Board

Yes

Are you currently serving on a Town Board or Committee?*

☐ Yes

☒ No

If yes, are you applying for a third consecutive term?*

☐ Yes

☒ No

If yes, please describe how you meet one, or more, of the following exceptions noted below.

After completing two full terms, a member must take off one year before applying for re-appointment to the same advisory board. However, a board member may apply to serve on another advisory board if he/she desires. The Board of Aldermen may make exceptions to this rule under the following circumstances: 1. To retain diversity on an advisory board; 2. A lack of applicants.

Print

Advisory Board Chair Report (Complete One Per Applicant) - Submission #5341

Date Submitted: 4/21/2021

Advisory Board Name:*

Adjustment Board

Chair Name*

Brian Hageman

Applicant First Name:*

Marcus

Applicant Last Name:

Page

1. Has the applicant previously served on this or another advisory board?*

☐

Yes

☒

No

2. If yes, how many total years have they served?

This should be available on the application or by asking the applicant.

3. Is the applicant already serving on this advisory board and seeking reappointment to their second, full term?

☐

Yes (Skip to Last Question)

☒

No

4. Is the applicant already serving on this advisory board and completed their two full terms?

☐

Yes

☒

No

5. Is the applicant applying for a special or expert seat on the advisory board?*

☐

Yes

☒

No

6. If yes, which seat?

7. Did the applicant attend an advisory board meeting?*

☒

Yes

☐

No

8. If applicant did not attend an advisory board meeting, did you contact them via phone or email?

☒

Yes

☐

No

9. Applicant has demonstrated a clear understanding of the time commitment, roles, and responsibilities of serving on the advisory board:

- ☒
- Yes
- ☐
- No

10. If no, briefly explain:

11. 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 Town Council liaison.

- ☒
- Diversity
- ☐
- Occupation, Experience, or Special Skills
- ☐
- Other

If other, please explain:

Print

Advisory Board Application - Submission #5301

Date Submitted: 3/10/2021

First Name*

Marcus

Last Name*

Page

Date*

3/10/2021

Select today's date

Address1*

306 Estes Drive Ext Apt I-7

Address2

City*

Carrboro

State

North Carolina

Zip*

27510

Is this address located within the corporate limits of the Town of Carrboro?*

Yes

Please select Yes or No.

Is this address located within the Town's ETJ, Planning Jurisdiction, or Northern Transition Area?*

Unsure

Telephone (111)-111-1111*

6513572086

Please enter your primary contact phone number.

Email Address*

marcus.l.page@gmail.com

Enter your primary email address.

The demographic information provided below is of interest because your elected officials want the Town's advisory boards to reflect the diversity of the Town. Diversity of the applicant pool is a priority of the Board.

Current Age*

11/15/1990

Race*

Black or African American

Please enter your race.

Sex*

Male

Please enter your sex.

Occupation*

Legal Governance Associate

Please enter your occupation.

Are you a registered Orange County Voter?*

Yes

Please answer Yes or No

Length of Residence in Orange County*

8 months

How long have you been a resident of Orange County?

Length of Residence in the Town of Carrboro*

8 months

How long have you been a resident of the Town of Carrboro?

I wish to be considered for appointment to the following committee/board(s) (Select no more than two (2)):

- | | |
|---|--|
| <input type="checkbox"/> Affordable Housing Advisory Commission | <input type="checkbox"/> Northern Transition Area Advisory Committee |
| <input type="checkbox"/> Appearance Commission/NPDC | <input type="checkbox"/> OWASA Board of Directors |
| <input type="checkbox"/> Arts Committee | <input checked="" type="checkbox"/> Planning Board |
| <input type="checkbox"/> Board of Adjustment | <input type="checkbox"/> Racial Equity Commission |
| <input type="checkbox"/> Climate Action Team | <input type="checkbox"/> Recreation and Parks Commission |
| <input type="checkbox"/> Economic Sustainability Commission | <input type="checkbox"/> Stormwater Advisory Commission |
| <input type="checkbox"/> Environmental Advisory Board | <input type="checkbox"/> Tourism Development Authority* |
| <input type="checkbox"/> Human Services Commission | <input type="checkbox"/> Transportation Advisory Board |
| <input type="checkbox"/> Greenways Commission | |

Please note that membership is limited to one advisory board at a time. You shall not be considered for appointment to another board unless you resign before filing an application or you are in the last six months of your current term.

Other (advisory board not listed):

Please indicate by typing the advisory board that you are applying for.

Advisory Board Preference*

Planning Board and Board of Adjustments

Please indicate your preference by typing your first choice. Please limit your selection above to two boards).

****Employer/Self Employed**

Please enter your employment information. This is a requirement for application for the Tourism Development Authority.

Number of Years Employed

Enter the number of years you have been employed at the organization listed to the left.

**** Provide examples of how you are involved in the promotion of travel and tourism in the Town of Carrboro.**

Required only for the Tourism Development Authority Application.

Community Activities/Organizational Memberships*

N/A as I have just moved here less than a year ago and due to the pandemic.

Please enter the requested information.

Relevant Experience:*

I have served on multiple committees and boards that range from the arts, financial industry along with the educational system from district wide to the collegiate level.

Reasons You Wish to be Appointed*

I wish to be appointed to serve a difference within my new community. I am looking to bring a diversity that's not only cultural but experience as well.

We believe as a Town and as a Town Council that racial equity and diversity and inclusion are important. Please tell us your thoughts about this and why they are important not only in advisory board/commission work but also in all facets of local government and community work.*

I believe racial equity, diversity and inclusion is important for any and every town because it's important that every member within the town should have someone that looks like them or can give a cultural difference to town, board or commission decisions. As someone who is a person of color within a new town such as Carrboro, it is more than impactful to see local government and the community work together to combat the issues that our community deals with while created great lasting memories within the community by hosting townhall meetings, events and activities for everyone to be a part of.

Have you ever served on any Town of Carrboro Committee or Board?*

If yes, which one(s)?

No

Are you currently serving on a Town Board or Committee?*

☐

Yes

☒

No

If yes, are you applying for a third consecutive term?*

☐

Yes

☒

No

If yes, please describe how you meet one, or more, of the following exceptions noted below.

After completing two full terms, a member must take off one year before applying for re-appointment to the same advisory board. However, a board member may apply to serve on another advisory board if he/she desires. The Board of Aldermen may make exceptions to this rule under the following circumstances: 1. To retain diversity on an advisory board; 2. A lack of applicants.