

Date Received: 5/2/8 Affice (For Office Use Only)

Application for: Authorities, Boards, Commissions, and Committees Note: All information on this document will be released to the public on request.

PLEASE **PRINT** clearly:

Name: George A. Scott	Ethnic Background: African American Sex: (M) [X] (F)
Home Phone Number: <u>919-880-2341</u>	
Home Fax Number: N/A	
Email Address: (Please provide this contact info	ormation) _gascott9@hotmail.com
Home Address:	
909 Brandon Rd. Durh	am NC 27713
(Street) (Cit	y) (State) (Zip)
Name of Authority/Board/Commission/Committed	ee applying for:
Board of Equalization and Review	
Specific category applying for: (e.g. Nurse, Eng	ineer, At-Large, etc.):
Alternate Member	
Qualification for specific category: <u>Licensed</u>	Real Estate Broker
Occupation: Self Employed Real Estate Dev	eloper
Place of Business: <u>G.A. Scott & Associates.</u>	
Business Address: P.O. Box 12325	Durham NC 27709
(Street)	(City) (State) (Zip)
Business Phone Number: 919-880-2341	Business Fax Number: N/A
Do you live within Durham County? Yes: [X]	No: Township:
Do you live within the corporate city limits? Yes	s: [X] No: 🗆
Education: B.S. Degree in Physics form NC	A&T State University

	County or City of Durham Board/Commission/Committee on which you Board of Equalization and Review
If reapplying for a pos	sition you presently hold, how many consecutive terms have you served?
• •	cations and experiences, briefly describe why your services on this Authority/Committee would be beneficial to the County of Durham:
I have 18 years of	experience on the Board of E&R
Are your taxes curren	t (e.g. animal, property, vehicle)? Yes: [X] No: \square
Are your City and Co	unty property and motor vehicle taxes paid in full on a current basis?
Yes: [X] No: \square	
Other information you	u consider pertinent: (i.e., civic memberships, related work experience, etc.):
How did you find out	about Durham County Boards and Commissions vacancies?
□Newspaper □Soc	cial Media (Facebook/Twitter) Durham County Website DEmail
☐Flyer [X]Word-of-	-Mouth Other:
(If necessary, you ma	ay add additional pages.) Check if additional pages are added:
	on on this document will be released to the public on request. us will not be accepted.
Applicant's signature: Return application to:	Date 05-02-2018 Clerk to the Board of County Commissioners 2nd Floor 8:30 a.m5:00 p.m. Mailing Address: Durham County Government Administrative Complex 200 East Main Street

Durham, NC 27701 Fax Number: (919) 560-0013