

## Application for Vacancy Appointment - Instructions

**ELIGIBILITY:** All persons who meet the eligibility criteria below may apply to be a Board Member.

- Candidates must be at least 18 years of age.
- Are any of the following: **Resident, Property Owner/Agent, Business Owner/Licensee**, within the Ocean Beach Planning Area (see map below).
- It is NOT necessary to be a registered voter with the state or county government.

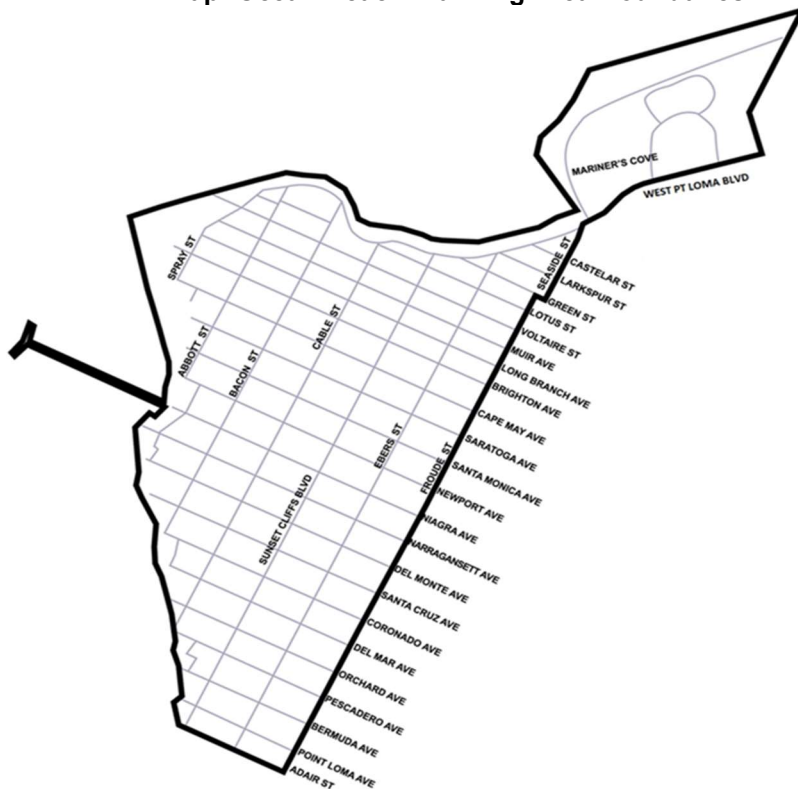
**GATHER SIGNATURES:** Obtain **10** signatures from within the Ocean Beach Planning Board Area.

- Signatures must be obtained from residents, property owners, or business owners/licensees within the Ocean Beach Planning Area (see map).

### SUBMIT APPLICATION AND SIGNATURES:

- Submit in person at a Board meeting. We meet the first Tuesday of each month at 6pm the OB Recreation Center at 4726 Santa Monica Ave, San Diego, CA
- Or submit via e-mail to: [admin@oceanbeachplanning.org](mailto:admin@oceanbeachplanning.org)
- or submit by mail to: Ocean Beach Planning Board, 4967 Newport Avenue #133, San Diego, CA 92107.
- You are also invited to submit a candidate statement (max 200 words recommended).

**Map: Ocean Beach Planning Area Boundaries**





## Application for Vacancy Appointment

I, (please print name) \_\_\_\_\_, affirm that I am at least 18 years of age and am one or more of the following:

(check all that apply)

**Resident:**

☐ Individual whose primary residence is located within the Ocean Beach Planning Area.

**Property Owner/Agent:**

☐ Residential – sole or partial owner, or their agent, of a residential real property in the Ocean Beach Planning Area.

☐ Non-Residential – sole or partial owner, or their agent, of a non-residential real property in the Ocean Beach Planning Area.

**Business Owner/Licensee:**

☐ Local business or not-for-profit owner, operator, or designee at a non-residential real property address.

My qualifying physical address is: \_\_\_\_\_

My mailing address is (if different from above): \_\_\_\_\_

Telephone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

I have read the Ocean Beach Planning Board bylaws located at [www.oceanbeachplanning.org/bylaws/](http://www.oceanbeachplanning.org/bylaws/) and agree to follow the regulations contained therein.

AFFIRMED, under penalty of perjury, this (date) \_\_\_\_\_ day of (month) \_\_\_\_\_ (year)\_\_\_\_\_.

Candidate Signature: \_\_\_\_\_



## Signature Sheet

This is a signature petition for: \_\_\_\_\_  
(applicant name)

By signing this form, I affirm that I have been a **RESIDENT, PROPERTY OWNER/AGENT and/or BUSINESS OWNER/LICENSEE** within the Ocean Beach Planning Area and that I support the above candidate to be qualified for election or appointment to the Ocean Beach Planning Board.

Illegible information or signatures without contact phone number cannot be verified and will be disregarded. All information provided will be kept private and used only to validate this application. (Minimum of 20 signatures required for election, or 10 for a vacant seat).

	Name/Business Name	Street Address	Phone #	Signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				