

Application Form

Profile

Prefix Daniel First Name balean Last Name

3251 NW 96th way Home Address Suite or Apt

Sunrise City FL State 33351 Postal Code

danielbalean@gmail.com Email Address

Home: (754) 777-2234 Primary Phone Alternate Phone

Current or Former Employer

Woolpert

Senior Architect Job Title

Duties

Review building plans

Years Employed

7

Do you have a contract with the City of Sunrise or are you a vendor? *

No

Do you work with a company that has a contract with the City of Sunrise? *

No

Did you receive a grant from the City of Sunrise for your 501(c)(3) charitable organization? *

No

Which Boards would you like to apply for?

Unsafe Structures Board: Submitted

Which of the boards you selected above is your first choice? *

Unsafe Structures Board

Daniel balean

Question applies to Unsafe Structures Board

This application seeks to fill the membership requirements of the Sunrise Unsafe Structures Board. Please select up to two options that apply to you:

Question applies to Unsafe Structures Board

Select an option that applies to you: *

☒ registered architect

Question applies to Unsafe Structures Board

Select the option that applies to you:

☒ registered architect

Briefly describe why you would like to serve on this advisory board:

Sounds interesting and I want to be involved with the city

Describe the qualifications, skills and abilities you possess that would directly benefit this board:

Im a registered architect. I've been on several construction sites. I e worked with engineers and have a good understanding off several disciplines

List your education background and area of study:

B.Arch and a Madters in architecture

Describe your involvement in the Sunrise community:

Sunrise Organization

Number of Years

Office(s) Held/Responsibilities

Sunrise Organization

Number of Years

Office(s) Help/Responsibilities

Are you a resident of the City of Sunrise?

☒ Yes ☐ No

Daniel balean

Are you a resident of Broward County?

☒ Yes ☐ No

Are you a citizen?

☒ Yes ☐ No

Appointment to this board will require your attendance at regularly scheduled meetings that may occur in the evening.

How many hours per month are you willing to commit as a volunteer?

2 maybe more if needed

If you are not appointed to a board at this time

Would you like to be considered for appointment to a board if a vacancy occurs?

☒ Yes ☐ No

ACKNOWLEDGEMENT:

I acknowledge that in accordance with Sunrise City Code Section 2-76(f), all applicants for or voting members of city boards shall be subject to a comprehensive background check to ensure they have 1) Not violated any standard of conduct or code of ethics established by law for public officials; 2) Not violated any standard of conduct or code of ethics established by law for any profession regulated by the State of Florida or any other state; 3) No criminal charges pending; 4) Not had a misdemeanor conviction in the ten-year period prior to the date of the proposed appointment; and 5) Not ever been convicted of a felony or a crime of moral turpitude. I shall sign all paperwork necessary to enable the city to perform said background check. I understand that if I am charged with a crime while I am a sitting member of a city board, agency, authority, committee or commission, that I am automatically removed from my position (Section 2-76, City Code). By executing this application, I hereby waive any rights I may have under Florida Statutes section 112.501, entitled "Municipal board members; suspension; removal." I acknowledge receipt of the separate documents entitled **DISCLOSURE REGARDING BACKGROUND INVESTIGATION** and **A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT** and that I have read and understand both of those documents. I understand that in accordance with the Florida Public Records Law, information on my application may be made public unless an exemption exists. I understand that all appointments are for voluntary, uncompensated service. If appointed, I agree to faithfully and fully perform the duties of my office, make every endeavor to serve my full term, and comply with all laws and ordinances of the City, County, and State of Florida, particularly those pertaining to the conduct of public officials and the financial disclosure requirements. I have received a copy of the City of Sunrise Code of Ethics (Chapter 10, Article II, City Code). Consistent with Florida Statutes pertaining to public records, please note that your social security number will not be released. Social Security Number Collection Disclosure Statement: Please be advised that pursuant to Section 119.071(5)(a)2.a., Florida Statutes, the City of Sunrise ("City") discloses that the City requests your social security number for the purpose of payroll eligibility verification, processing employment benefits, income reporting, tax reporting, background checks on employee applicants, advisory board applicants, or other City program volunteers. Social security numbers are also used as a unique numeric identifier and may be used for search purposes.

☒ I Agree

Question applies to multiple boards

Please complete an application for a comprehensive background check by going to the

[Existing Board Member](#)

[New Board Member Applicant](#)

Question applies to multiple boards

NOTICE

Required Filing of Form 1 - Statement of Financial Interests

Question applies to multiple boards

ACKNOWLEDGMENT:

I acknowledge that Individuals who are appointed to the Unsafe Structures Board are considered to be a Form-1 filers. New appointees will be provided with a Form 1 - Statement of Financial Interests form that must be filed with the Supervisor of Elections of the county in which he/she resides within thirty (30) days of the appointment. All Form-1 filers are required to annually submit a Form 1 - Statement of Financial Interests and may also be required to submit a Form 9 - Quarterly Gift Disclosure form. Within sixty (60) days of leaving an unfinished term, a Form 1F must be filed.

☒ I Agree