



SPECIAL MAGISTRATE APPLICATION INDIAN RIVER COUNTY VALUE ADJUSTMENT BOARD

(APPLICANTS MUST MEET QUALIFICATIONS OUTLINED IN [FLA. STAT. § 194.035](#))

Please type or print. If more space is needed, attach additional sheets. *Applicants may supplement their application with a resume. However, a resume cannot be used in lieu of an application.*

Application for: Attorney Special Magistrate
 Appraiser Special Magistrate for...
 Real Property and/or Tangible Personal Property

If appointed, how much time would you be available to conduct hearings and complete your recommendations?
 1 to 8 hours per week; 9 to 20 hours per week; 21 to 30 hours per week; 31 to 40 hours per week.

APPLICANT INFORMATION

Name: _____
Home Address: _____
Mailing Address: _____
Business Name: _____
Business Address: _____
Phone: Home/ _____ Business/ _____ Cell/ _____
Fax: _____
E-Mail: _____

DOCUMENTATION REQUIRED

Verification of qualifications will be made prior to consideration of this application, pursuant to FS 194.035.

- Copy of license referenced below.
- Documentation to support membership in professional organizations listed below under Organizations.
- A writing sample, which may consist of an opinion letter or other business-related documentation that contains one or more written pages of original material. *If you have served as a special magistrate previously, please submit a recommended decision as your sample.* Do not submit a copy of an appraisal as a writing sample.
- Prior to conducting hearings, all applicants are required under Fla. Stat. § 194.035 to certify completion of the current year training provided by the Department of Revenue. To obtain the training, go online to the Department's website at <http://dor.myflorida.com/dor/property/vab/training.html>. Return your completion certificate to the VAB clerk.

L I C E N S U R E / E X P E R I E N C E

Attorney Magistrate Applicant: Bar Number: _____ Date of Admission: _____
How many years of experience do you have in the area of ad valorem taxation: _____

Appraiser Magistrate Applicant: Residential Appraiser License #: _____ Valid Through: _____
General Appraiser License #: _____ Valid Through: _____

Provide number of years of experience you have in the area of real property valuation: _____
Describe experience, and number of years you have in the area of tangible property valuation: _____



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QUALIFICATIONS/EXPERIENCE

1. Educational Background

Horizontal line for educational background

2. List any experience and/or specialty for the following property types:

Table with 2 columns: PROPERTY TYPE and EXPERIENCE/SPECIALTY. Rows include Residential Real Property, Commercial Real Property, Tangible Property, and Other (please specify).

3. If you currently or previously have served as a special magistrate, please provide the municipality or county and dates served.

Horizontal line for municipality and dates served

4. Have you ever been dismissed, terminated or denied appointment as a special magistrate for poor or improper performance? [] No [] Yes (please explain)

Horizontal line for explanation

5. List any additional information which makes you qualified to serve as a special magistrate. Also provide name and contact information of at least two individuals who can attest to your years of experience in ad valorem taxation, tangible personal property or real property appraisals.

Horizontal line for additional information

6. Are you willing to accept the Value Adjustment Board established schedule of fees? [] Yes [] No
If no, please indicate your schedule of fees to be charged the board on a one-hour basis.

Horizontal line for fee schedule

7. Explain your level of knowledge and experience with computers and list the applications you are familiar with, including Axia.

Horizontal line for computer knowledge

ORGANIZATIONS

1. List each organization, recognized by the real estate appraisal industry or the professionals in that field, in which you are currently or have previously been a designated member:

Table with 4 columns: ORGANIZATION, DESIGNATION, DATE, MEMBER #

2. Of those organizations describe any possible conflict of interest that could occur or the appearance of a conflict of interest that may prevent you from fairly conducting a hearing:

Horizontal line for conflict of interest



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3. Have you ever been disbarred, suspended or received any other disciplinary action from any organized association, or from the State of Florida? No Yes (please explain)

4. List any personal or business relationship you have ever had with any officer or employee of the office of the property appraiser, office of the clerk of the circuit court, office of the county attorney or the value adjustment board of any of the counties to which you are applying:

5. List any clubs, organizations, associations, or other entities to which you belong or participate in and in which a possible conflict of interest could occur or the appearance of a conflict of interest might arise that would prevent you from fairly conducting the hearing between the property appraiser and the property owner and taxpayer.

CERTIFICATION

Pursuant to Fla. Stat. § 194.035, a person cannot serve as a special magistrate if he/she is an elected or appointed official of a county, a taxing jurisdiction, or the state; is an employee of a county, a taxing jurisdiction, or the state; or in the same tax year that he/she services the Board as a special magistrate, represents a party before the Board in any administrative review of property taxes.

Are you an elected or appointed official or employee of a county, a taxing jurisdiction, or the state? Yes No
If yes, please provide details: _____

The undersigned certifies, under penalty of disqualification from consideration, that each item contained in this application, or any other document furnished by or on behalf of the applicant is true and complete as of the date it bears. The undersigned authorizes the Value Adjustment Board to obtain information from other sources to verify each item contained herein. The undersigned acknowledges that, if selected, he/she will follow all requirements and mandates of law in fulfilling the duties of special magistrate.

_____ Date: _____
Signature of Applicant

Printed Name of Applicant