

ATTORNEY SPECIAL MAGISTRATE INFORMATION SHEET

Instructions: Please TYPE or PRINT LEGIBLY. When submitting this form with your resume, it is not necessary to include a cover letter. Enclosed is a copy of the application to be forwarded to the Value Adjustment Board (VAB) for the 2012 tax year. COMPLETED APPLICATIONS MUST BE RECEIVED IN OUR OFFICE NO LATER THAN 5:00 P.M. ON JULY 16, 2012.

NAME: _____

MAILING ADDRESS: _____

TELEPHONE NUMBER: _____ FAX NUMBER: _____

E-MAIL ADDRESS: _____

DO YOU HAVE VAB EXPERIENCE HEARING: _____ NUMBER OF YEARS EXPERIENCE _____

_____ PROPERTY TAX EXEMPTIONS

_____ CLASSIFICATIONS

_____ PORTABILITY ASSESSMENT DIFFERENCE TRANSFER PETITIONS

Initial all items as an acknowledgment:

_____ ATTENDANCE AT AN ORIENTATION SESSION IS MANDATORY IF SCHEDULED. COMPENSATION IS APPROVED.

_____ ATTORNEY SPECIAL MAGISTRATES MUST BE A FLORIDA BAR MEMBER WITH FIVE YEARS EXPERIENCE IN THE AREA OF AD VALOREM TAXATION.

_____ MUST COMPLETE DEPARTMENT OF REVENUE TRAINING FOR THE 2012 TAX YEAR (AT OWN EXPENSE) AND PRODUCE A STATEMENT OF COMPLETION PRIOR TO CONDUCTING HEARINGS.

_____ HEARINGS WILL BE CONDUCTED BY SPECIAL MAGISTRATES, WHO MEET THE REQUIREMENTS AS OUTLINED IN F.S.194.035, FOR PERIODS BEGINNING AS EARLY AS 8:00 A.M. AND ENDING WHEN THE LAST SCHEDULED HEARING IS COMPLETED (NORMALLY 5:00 P.M. OR SHORTLY THERE AFTER) IN BOTH NEW PORT RICHEY AND DADE CITY.

_____ AT THE CONCLUSION OF SCHEDULED HEARINGS, WRITTEN DECISIONS SHOULD BE COMPLETED AND SUBMITTED NO LATER THAN 20 WORKING DAYS AFTER YOUR LAST SCHEDULED HEARING.

_____ COMPENSATION IS NOT PROVIDED FOR LUNCH PERIODS, ADDITIONAL TRAINING, MILEAGE, PARKING, POSTAGE, OR OTHER EXPENSES. THE COMPENSATION RATE IS \$125.00 PER HOUR FOR PRESIDING OVER SCHEDULED HEARINGS, DELIBERATING RESULTS, AND PREPARING WRITTEN DECISIONS INCLUDING FINDINGS OF FACTS, AND CONCLUSIONS OF LAW.

_____ FLORIDA STATUTES PROHIBIT SPECIAL MAGISTRATES FROM REPRESENTING ANY PROPERTY OWNER IN A HEARING BEFORE ANOTHER SPECIAL MAGISTRATE OR BEFORE THE VAB IN PASCO COUNTY DURING ANY YEAR IN WHICH THEY SERVE AS A VAB SPECIAL MAGISTRATE.

_____ THIS DOCUMENT AND ANY MATERIAL SUBMITTED WILL BECOME PART OF THE PUBLIC RECORD.

UNDERSTANDING THE ABOVE INFORMATION, I WISH TO BE CONSIDERED FOR APPOINTMENT AS A SPECIAL MAGISTRATE BY THE VALUE ADJUSTMENT BOARD OF PASCO COUNTY, FLORIDA.

Signature: _____

Date: _____

VALUE ADJUSTMENT BOARD, PASCO COUNTY, FLORIDA
Attorney Special Magistrate Application

Applicant Information	
Please type or print. If more space is needed, attach additional sheets. Incomplete applications will be returned.	
Name:	Date:
Address:	
Business Name/Address:	
Phone Numbers:	
Home:	Business:
Cell:	Fax:
E-mail:	

Certification

The undersigned certifies, under penalty of disqualification from consideration, that each item contained in this application or in 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 to the Value Adjustment Board.

Applicant Signature:	Date:
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General Information

Important: A resume may be submitted along with the application but cannot be used in lieu of an application.

Note: Your selection as a Special Magistrate does not ensure that you will be scheduled to serve any particular number of days or hear any particular type or number of cases. The Board reserves the right to schedule Special Magistrates in its absolute discretion, which may result in some Special Magistrates serving more than others.

If you are selected as a Special Magistrate, will you be available to serve as scheduled, beginning in October through completion of the Value Adjustment Board process for the current tax year?	YES	NO
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Are you currently a member in good standing with the Florida Bar?	YES	NO
Are you currently an elected or appointed official?	YES	NO
Are you currently an employee of Pasco County?	YES	NO
Do you serve a municipality or governmental entity in any capacity?	YES	NO
List any disbarment, suspension, or other disciplinary action that you have received from any organized bar association.		
Are you aware of any potential conflicts of interest (i.e. any companies or persons whose cases you could not hear)?	YES	NO
Have you ever been a party to or attorney on any legal action against the Property Appraiser or Pasco County?	YES	NO
If yes for any of the above, please explain.		
Professional Membership & Designations		
Professional memberships, licenses, specialty designations, and activities: (List memberships in professional organizations and past or present activities in such organizations.)		
Ad Valorem Taxation Experience		
Do you have no less than five years experience in the area of ad valorem taxation?	YES	NO
List and describe your employment experience in ad valorem taxation issues for the last five (5) years including exemption, agricultural classification, and portability assessment difference issues.		
List professional and technical courses, seminars, and clinics dealing with ad valorem taxation that you attended and satisfactorily completed during the past three (3) years.		

If you have previously **conducted hearings** as a Value Adjustment Board Special Magistrate, please provide the following information:

County Name	Date/Year(s) Served

Type of hearings you are qualified to adjudicate: (Check the appropriate boxes)

- Homestead Senior Widow/Widower Religious Blind
- Veteran Disability Governmental Agricultural Portability
- Other

If applicable, explain why you no longer serve as a Special Magistrate in the above counties.

List any personal or business relationship you have ever had with an officer or employee of the offices of the Property Appraiser, Clerk and Comptroller, County Attorney, VAB Attorney or Value Adjustment Board in any county.

DOCUMENTATION REQUIRED

1. **Supporting documentation in regard to your professional memberships and designations; your application will not be considered until verification is received.**
2. **A writing sample, which may consist of an opinion or other business-related documentation that contains one or more written pages of original material.**
3. **Attach 2012 DOR training certification or note an anticipated completion date:_____**

Qualified individuals wishing to serve should submit the **COMPLETED** application on or before **July 16, 2012**, to:

**Value Adjustment Board
East Pasco Government Center
14236 6th Street, Suite 201
Dade City, FL 33523**

If you have any questions, please contact the Value Adjustment Board at (352) 521-4347.