

CITY CLERK'S OFFICE  
TEXARKANA, AR

# CITY OF TEXARKANA, ARKANSAS

## Application for Appointment to Citizen Advisory Board or Commission

(Please type or print clearly)

RECEIVED  
FEB 09 2017  
BY: JNK

**BOARD OR COMMISSION DESIRED** (Please apply for one (1) board or commission per application.)

- |  |   |
|--|---|
| <input type="checkbox"/> Advertising & Promotion Commission                    | <input type="checkbox"/> Historical District Commission                       |
| <input type="checkbox"/> Airport Authority                                     | <input type="checkbox"/> Library Board  |
| <input type="checkbox"/> City Beautiful Commission                             | <input type="checkbox"/> Municipal Auditorium Project Advisory Commission     |
| <input type="checkbox"/> Board of Adjustment                                   | <input type="checkbox"/> Planning Commission                                  |
| <input type="checkbox"/> Civil Service Commission                              | <input type="checkbox"/> Plumbing Review Board                                |
| <input type="checkbox"/> Electrical Review Board                               | <input type="checkbox"/> SWAWIB-Southwest Arkansas Workforce Investment Board |
| <input checked="" type="checkbox"/> Heating & Air Conditioning Board of Review | <input type="checkbox"/> Other: _____   |

Name: Thomas Bui DBA Thomas Bui & Sons, Inc Home Phone: 870-773-1958

Address: 3028 East 9Th St. TXK AR Texarkana Resident  Yes  No 1979 Years

E-Mail Address: thomasbuisons@cableone.net Miller Co. Voter Registration No. \_\_\_\_\_

Employer: THomas Bui & Sons, Inc Work Phone: 870-773-8193

Position: President /Owner

Education:  
College: \_\_\_\_\_ High School: \_\_\_\_\_

Special knowledge or past experience qualifying you for this appointment: (Please feel free to attach resume):  
\_\_\_\_\_  
\_\_\_\_\_

Other relevant information (civic activities, memberships, etc.):  
\_\_\_\_\_  
\_\_\_\_\_

References: List the name and phone number of at least one Texarkana resident as a reference, especially any City staff, City Council, or current Committee members who may be contacted on your behalf.

Name: Larry Hartline, Paul Jones inspection for HVACR Phone Number: \_\_\_\_\_

Interest: Explain why you are interested in being appointed to this board or commission.  
To help serve the community with my knowledge and Experience for over 33 years.

Experience: Indicate what meeting(s) you have attended of the committee for which you wish to be considered.

HVACR Heating and Air Conditioning review

Number of Texarkana, Arkansas Board of Directors Meetings you have attended in the past 12 months: \_\_\_\_\_

Please read the statement below and sign your name to indicate your understanding.  
**I UNDERSTAND MY ATTENDANCE WILL BE REQUIRED AT ALL COMMITTEE MEETINGS AND THE INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT.**

Signature of Applicant: [Signature] Date Submitted: 1-21-2013

Return completed application to:  
Patti Scott Grey, City Clerk  
216 Walnut Street (or)  
P O Box 2711  
Texarkana TX 75504-2711  
Phone 870-779-4995 or Fax 870-774-3170

City Clerk Stamp  
**CITY CLERK'S OFFICE  
TEXARKANA, AR**  
RECEIVED  
JAN 28 2013  
BY: [Signature]

Please Note: This application will be on file for one (1) year.