

MARION COUNTY BOARD OF COUNTY COMMISSIONERS
APPLICATION FOR APPOINTMENT TO ADVISORY BOARD

APPLICATION DATE: 18 March 2024

BOARD NAME: Code Enforcement Advisory Board

PERSONAL INFORMATION

Title: Mr. Mrs. Ms. Miss
Name: Len M Racioppi
Address: 5288 SW 85th St
City: Ocala State: FL ZIP: 34476
Home Phone: 908 - 403 - 3140 Alternate Phone:
E-mail Address: LMRWVU@outlook.com
Occupation: Retired - Global Projects Area - Mgr - oversee staff implementing a wide variety of projects
If Retired, previous occupation: for ExxonMobil - responsible for conformance to bid / spec & design requirements

PREFERRED MAILING ADDRESS (IF DIFFERENT FROM RESIDENCE):

Address:
City: State: ZIP:

Is your address or any other personal information exempt under the Florida Statutes? Yes No
If yes, please cite the applicable Florida Statute: F.S. #

What is your preferred form of communication? Phone Mail Email

Are you a registered voter? Yes No

Do you own homestead property in Marion County? Yes No

Are you employed by Marion County or have relatives that are Marion County employees? Yes No
If yes, please provide position, department and/or relationship to County employee and their position/department

Have you been convicted (including a withholding of adjudication), pled guilty or pled to a Nolo Contendere (no contest) to a misdemeanor or felony (including a criminal traffic violation)? Yes No

A "YES" answer will not necessarily bar you from serving on an advisory board. The nature, severity, and date of the offense in relation to the position for which you are applying will be considered. If you are not sure or do not remember what happened in a criminal case (s), contact the appropriate county, state, or federal agency so that you can report accurate information on your criminal history. Failure to accurately report this information may result in removal from the board. If you answered "YES" please give details, an additional sheet of paper may be used.

WHY DO YOU DESIRE TO SERVE ON THIS/THESE BOARDS?

(Include current or previous work experience; community involvement; interests/activities)

Interested to apply experience from ExxonMobil construction / demolition and environmental restoration projects now at the County level for successful and compliant growth for Marion citizens and builders. Familiar with building to required specifications and interpreting requirements on both US and international (EU / AP) projects. Highest education is Masters Degree West Virginia School of Industrial Engineering. Practical field experience at US refineries and chemical sites over a +30yr career. Strong civic commitment and communication skills.

SERVING ON OTHER BOARDS

Do you currently serve on any other boards in Florida, or are you an elected or appointed state, county (Marion County or other county) or municipal ("city") office holder? Yes No

If yes, which board? _____

(Important: You may not serve on more than one (1) Substantive Board: Board of Adjustment; Code Enforcement Board; License Review Board; Land Development Regulation Commission; Historical Commission; Hospital District Board of Trustees; Housing Finance Authority; Industrial Development Authority; Tourist Development Council; Parks and Recreation Advisory Council)

Have you ever served on a City or County advisory board? Yes No

If yes, when, where and which board(s)? _____

REFERENCES - Please list three (3) personal and/or business references
(PLEASE DO NOT USE COMMISSIONERS AS REFERENCES)

Name: Brigitte Smith
Phone Number: 727 - 482 - 1124 Email: brigittesmith37@yahoo.com

Name: Randy Osborne
Phone Number: 352 - 572 - 7598 Email: Randyo.rec@gmail.com

Name: Deborah Edwards
Phone Number: 281 639 2505 Email: daefsu@outlook.com

I authorize Marion County to contact my references and I understand that all statements made on this application may be verified by Marion County. INITIAL LMR

I understand the responsibilities associated with being a board member, and I have adequate time to serve if appointed. INITIAL LMR

I agree to complete training within six (6) months from the date of my appointment. INITIAL LMR

By signing this application, I certify that the information I provided in this application is true and correct, and that any misstatements or material omissions on my application may result in my removal from my appointed position.

SIGN:  PRINT: Len M Racioppi
MARION COUNTY BCC

RECEIVED BY BCC: _____ **MAR 18 2024**

This application will be kept on file for a period of one year from date of receipt by the Board of County Commissioners. Should a vacancy occur on the board to which you have applied, you will be notified.

RETURN FORM TO:
MARION COUNTY BOARD OF COUNTY COMMISSIONERS 601 SE 25th Avenue, Ocala, FL 34471
Or via email to: Commissionadmin@marionfl.org

PLEASE CALL THE COMMISSION OFFICE AT (352) 438-2323 IF YOU HAVE ANY QUESTIONS REGARDING YOUR APPLICATION.