MEMORANDUM

To: Members of the City Council

From: Mayor Joseph W. Peel

Date: March 23, 2016

Re: Consideration – Reappointment to Alcoholic Beverage Control Board

BACKGROUND:

The Pasquotank County Alcoholic Beverage Control Board is organized pursuant to requirements of NCGS §18B-700 to serve the locality responsibly by controlling the sale of spirituous liquor and promoting customer-friendly, modern and efficient stores. The City and County each appoint two members to the board and one member is appointed jointly and confirmed by both boards. Terms are four years.

ANALYSIS:

Mr. Anthony Jerome Turner was first appointed to the ABC Board on January 14, 2008. He was reappointed to a second term on March 12, 2012, and that term expired on February 28, 2016. He serves as the joint City/County appointee.

Pasquotank County notified the City that the County Commission reappointed Mr. Turner to serve an additional four-year term during their meeting of March 21, 2016 (see attached email).

Also attached, please find an application for reappointment, which was submitted by Mr. Turner. I believe that his experience and qualifications make him an excellent candidate for reappointment. I request that the City Council concur with Mr. Turner's reappointment made by Pasquotank County.

MAYOR'S RECOMMENDATION:

By motion and ***roll call vote***:

- Reappoint Anthony J. Turner to serve an additional four year term on the Pasquotank County Alcoholic Beverage Control Board ending February 28, 2020 and instruct staff to notify Pasquotank County of Council's action.

JWP/vdw

Vivian White

From: Lynn Scott
Sent: Tuesday, March 22, 2016 1:02 PM
To: vwhite@cityofec.com
Subject: FW: Happy Friday!

Hey Vivian.

Our Appointments Committee met last night and reappointed Anthony Jerome Turner to the ABC Board. Please let me know when your board concurs. Thanks.

Lynn Scott
Clerk to the Board
Pasquotank County Manager's Office
206 E. Main Street, Rm E201
Elizabeth City, NC 27909
252-335-0865 (p)
252-335-0866 (f)

From: Lynn Scott
Sent: Friday, February 12, 2016 11:13 AM
To: 'Vivian White'
Subject: RE: Happy Friday!

Hey Vivian. It will be on our 3-7-16 agenda.

Lynn Scott
Clerk to the Board
Pasquotank County Manager's Office
206 E. Main Street, Rm E201
Elizabeth City, NC 27909
252-335-0865 (p)
252-335-0866 (f)

From: Vivian White [mailto:vwhite@cityofec.com]
Sent: Friday, February 12, 2016 10:38 AM
To: Lynn Scott
Subject: Happy Friday!

Hi, Lynn
Anthony Turner's term on the ABC Board expires on February 28, 2016. He is a joint appointee by the County and City. I recall that the County made the appointment and sent it to us for concurrence. Is your board working on this?

Stay safe in the SNOW!!

Vivian White, CMC/NCCMC
City Clerk
City of Elizabeth City
306 E. Colonial Avenue ~ P. O. Box 347

CITY OF ELIZABETH CITY
Application for Board, Committee or Commission Appointment

PLEASE NOTE: This application is a public record under North Carolina law and will be shared with third parties upon request and without notice. If there is any information you do not want released to the public, please do not include it.

Is this application for appointment _____ or reappointment? XXX

PLEASE TYPE OR PRINT CLEARLY:

1. **Personal Information:**

Name: ANTHONY J. TURNER

Mailing Address: 208 NATIVE DANCER COURT Email: N/A

City and State ELIZABETH CITY, NC Zip Code 27909

Telephone: Home: _____ Cell: (252)562-2773 Business: (252)331-2653

*Sex: MALE *Race: AFRICAN AMERICAN *Age: 42

**This information is requested for the sole purpose of assuring that a cross-section of individuals is appointed to serve our community.*

Employed By: CHAMPION KUTZ BARBER SHOP Current Position: BARBER/STYLIST

2. **Where do you reside?**

In Elizabeth City's City Limits? XX If so, which Ward? 4TH

In Elizabeth City's Extraterritorial Jurisdiction (ETJ)? _____

In Pasquotank County outside Elizabeth City's ETJ? _____

3. **Are you currently serving on another board, committee or commission appointed by the City of Elizabeth City? If so, please identify:** NO

N/A

PLEASE NOTE: No resident of the City of Elizabeth City may serve in more than two appointed positions at one time in City of Elizabeth City government, unless exempted by nature of the position he or she may hold in governmental service.

4. **If you previously served on a City board, committee or commission, did you fulfill your term to completion?** YES

5. **Please indicate by number your order of preference in serving on the following boards, committees or commissions:**

1 Alcoholic Beverage Control Board	_____ Planning Commission
_____ EC/PC Airport Authority	_____ Personnel Appeals Committee
_____ Board of Adjustment	_____ Parks and Recreation Advisory Board
_____ Community Relations Commission	_____ Senior Citizen Advisory Committee
_____ Elizabeth City Housing Authority	_____ Storm Water Advisory Board
_____ Historic Preservation Commission	_____ Tourism Development Authority
_____ Central Communication Advisory	_____ Urban Forestry Commission
_____ Joint Animal Control Board	

6. **List below any experience or qualifications you have that are relevant to the board/committee/commission for which you are applying.** (*Use additional sheet, if necessary.*)

EIGHT (8) YEARS OF PREVIOUS EXPERIENCE SERVING ON THE ALCOHOLIC BEVERAGE CONTROL BOARD.

Applicant Statement:

I understand that I am applying for appointment to a board, committee or commission for the City of Elizabeth City; that I will be required to take an oath of office to uphold the constitutions of the United States and North Carolina and the laws of the same, if appointed; that I will be required to meet the attendance and training requirements of the City if I am appointed, and may be removed from office for failure to meet attendance requirements; that for members of those boards, commissions or committees established by the City Council as requiring annual disclosure, completion of the City's General Disclosure Form, required by Section 2-114 of the City's Code of Ethics Conflict of Interest Ordinance shall be completed by February 1 of each year; and that my application will remain on file for consideration for a period of three (3) years, after which time I will need to file a new application. I agree to comply at all times with all requirements of the office for which I am applying.

By my signature below, I hereby certify that all the information contained herein is true to the best of my knowledge and belief.

Date: March 22, 2016 Signature: Anthony J. Turner

PLEASE SUBMIT THIS APPLICATION TO:
City Clerk's Office
P. O. Box 347
Elizabeth City, NC 27909
Fax: (252) 337-6956
Phone: (252) 337-6955
Email: vwhite@cityofec.com

OFFICE USE ONLY

Residence:
_____ Inside
_____ ETJ
_____ County
Appointed: _____
Term: _____
Date: _____