MEMORANDUM

To: City Councilors

From: Mayor Joseph W. Peel

Date: March 20, 2017

Re: Consideration – Appointment of Richard Turner to the Fireman's Relief Fund Board

BACKGROUND:

The Fireman's Relief Fund Board is required by NCGS 58-84-30. The Board is composed of five members, two of whom shall be elected by members of the local fire department, two of whom shall be appointed by the City Council and one of whom shall be named by the Commissioner of Insurance. (Although it is not required, it has historically been the practice of the Council to appoint a member of the City Council to serve as one of the City's appointees). The Commissioner of Insurance appointee serves at the pleasure of the Commissioner. Terms are to be staggered for two years; however, the statute does not limit the number of terms an appointee may serve. (The Council policy on board appointments, which was adopted in 2014, limits terms to two consecutive two-year terms in the absence of a stated policy.)

ANALYSIS:

Mr. Charles Koch was appointed to serve the Fireman's Relief Fund by former Mayor Melvin Daniels sometime between 1987 and 1989. In January 2015, Mr. Koch was advised of the new Council board policy; and in order to begin compliance with the new procedures, he was reappointed to a final two year term at that time.

It is my recommendation that the Council consider Mr. Richard Turner of 309 Rhode Island Avenue as a Council appointee to replace Mr. Koch. Mr. Turner has 33½ years of firefighting experience. He also has served on the Committee on Fire Departments for Northeastern NC for COA. I believe his previous experience will provide a keen understanding of the board and its obligations.

RECOMMENDATION:

By motion and ***roll call vote***, appoint Mr. Richard Turner to serve a two year term on the Fireman's Relief Fund Board to expire January 31, 2019.

JWP/vdw

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?** _____

PLEASE TYPE OR PRINT CLEARLY:

1. **Personal Information:**

Name: Richard Turner

Mailing Address: 309 Rhode Island Ave Email: _____

City and State Elizabeth City, N.C. Zip Code 27909

Telephone: Home: 252-335-7125 Cell: 252-202-9550 Business: _____

*Sex: M *Race: N *Age: 64

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

Employed By: Dept. of Defence - Navy Fire Dept - Mid Atlantic - Norfolk, VA (Retired from Both Jobs) Current Position: City of Elizabeth City - Waste Treatment Plant

2. **Where do you reside?**

In Elizabeth City's City Limits? Yes 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

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?** NO

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

_____ 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	✓ Firefighter's Relief Fund 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.*)

Retired Prof: Fire Fighter with 33½ years of Fire Service - 20 yrs - with Navy Fire Dept Retired from City of Elizabeth City Paid → 13½ years Volunteer Fire Service / Served on Committe on Fire Depts for Northeaster N.C. at College of Albermarle / Life Retired time member of International Association of Black Professional Firefighters.

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: 3/13/17 Signature: Richard 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: _____