

Staff Use Only:

Council District

20

This application is a

Reappointment

New Appointment

## GREENVILLE COUNTY SPECIAL TAX DISTRICT APPLICATION

Special Tax District \_\_\_\_\_

An individual may only apply to serve on one board or commission during any election cycle.

In order for your application to be given consideration, it is critical that you answer all of the following questions as completely as possible.

Mr    Mrs    Ms    Miss   Edwin E. Tepera

Home Address   5 Mill Estate Road   City   Taylors

Zip   29687   Home Phone   \_\_\_\_\_   Work Phone   NA

Voter Registration Number   \_\_\_\_\_   Email   \_\_\_\_\_

**\*\*You must be registered to vote in Greenville County at the time of application**

Occupation   Retired

Employer   NA

Employer Address  
NA

**Volunteer Experience**

Old Mill Estate Home Owners Association President, Vice President, Tax Commission Member, and currently Tax Commission Chairperson

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you currently hold any elected or appointed office or commission   Yes

If yes, list   Chairperson Old Mill Special Tax District

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been fined for any ethics violations?   No

If so, please comment  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe your understanding of the role of a member of the board or commission to which you are applying \_\_\_\_\_

Have served as a member for several years and the last four years as Chairperson.

---

---

---

What specific skills do you believe you could contribute as a member of this board or commission? \_\_\_\_\_

Leadership

---

---

---

Have you ever been convicted of a crime other than a minor traffic violation?

Yes

No

---

---

---

Do you, any member of your family or a business with which you or a member of your family is associated, provide goods and/or services to this board for payment?

Yes

No

---

**Statement**

*By my signature, I state that all information contained in this application is true and accurate to the best of my knowledge.*

*I understand it is my responsibility to insure my application is submitted within the application period and that it has been received by the County Council Office.*

*I understand my appointment to the board for which I am applying will not result in me receiving any compensation for my service.*

Signature \_\_\_\_\_

Date \_\_\_\_\_

Recommended by \_\_\_\_\_

**Please return completed form to:**

**Greenville County Council  
301 University Ridge, Suite 2400  
Greenville, SC 29601-3665**

If you have questions, please call 467-7115 or check the [www.greenvillecounty.org](http://www.greenvillecounty.org) website.