

**MARTIN COUNTY, FLORIDA
VALUE ADJUSTMENT BOARD**

**REQUEST FOR PROPOSALS
FOR
SPECIAL MAGISTRATE**

June 1, 2010

**MARTIN COUNTY VALUE ADJUSTMENT BOARD
REQUEST FOR PROPOSALS
FOR SPECIAL MAGISTRATE**

I. INTRODUCTION

A. Objectives

The Martin County, Florida, Value Adjustment Board is requesting proposals from appraisers and attorneys who are licensed in the State of Florida and meet certain criteria to serve as an Appraiser Special Magistrate or an Attorney Special Magistrate for the 2010 tax year for the Martin County Value Adjustment Board.

B. Proposal Submission Instructions

1. Sealed Proposals

All proposals shall be submitted in a sealed envelope on or before 5:00 p.m. on August 20, 2010.

One original and six (6) copies to:

Elizabeth Curra, Deputy Clerk to the Value Adjustment Board
2401 SE Monterey Road, Accounting Division
Stuart, FL 34996

The Board reserves the right to reject any and all proposals, to waive any informalities or irregularities in any proposals received, to re-advertise for proposals, or take any other such actions that may be deemed to be in the best interest of the Board.

2. Proposal Response

Each proposal should address all pertinent areas and be specific. Any conditions should be clearly stated. The failure to disclose substantive terms, conditions and covenants may be considered cause for the proposal to be rejected by the Board.

3. Questions, Additional Information

All requests for clarifications or additional information should be directed to Martin County at the following address:

Elizabeth Curra, Deputy Clerk to the Value Adjustment Board
2401 SE Monterey Road, Accounting Division
Stuart, FL 34996
(772)288-5719

II. Information To Be Included In The Proposal

A. Letter of transmittal

B. Application: Please fill out all applicable provisions of Special Magistrate Application.

EOE/VETS PREF/DFWP

**SPECIAL MAGISTRATE APPLICATION
MARTIN COUNTY, FLORIDA**

PLEASE TYPE OR PRINT. IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS.

1. PROVIDE THE FOLLOWING GENERAL INFORMATION:

NAME: _____

SOCIAL SECURITY #: _____

HOME ADDRESS: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

PHONE #: BUSINESS: _____ HOME: _____ FAX: _____

CELLULAR PHONE: _____ EMAIL ADDRESS _____

2. A. ARE YOU AN ELECTED OR APPOINTED OFFICIAL OR EMPLOYEE OF MARTIN COUNTY?

___ YES ___ NO

B. HAVE YOU COMPLETED THE DEPARTMENT OF REVENUE VALUE ADJUSTMENT BOARD TRAINING? ___

YES ___ NO

3. APPLICATION FOR: ___ ATTORNEY SPECIAL MAGISTRATE
 ___ APPRAISER SPECIAL MAGISTRATE
 ___ FULL TIME POSITION
 ___ ALTERNATE POSITION
 ___ FULL TIME AND/OR ALTERNATE POSITION

4. IF YOU ARE A MEMBER OF THE FLORIDA BAR, PLEASE PROVIDE THE FOLLOWING INFORMATION:

BAR NUMBER: _____ DATE OF ADMISSION: _____

LIST ALL SOURCES OF YOUR KNOWLEDGE, INCLUDING EDUCATION AND EXPERIENCE.

LIST ANY DISBARMENT, SUSPENSION OR ANY OTHER DISCIPLINARY ACTION WHICH YOU HAVE RECEIVED FROM ANY ORGANIZED BAR ASSOCIATION:

5. IF YOU ARE CURRENTLY A LICENSED FLORIDA REAL ESTATE BROKER OR A CERTIFIED OR LICENSED FLORIDA REAL ESTATE APPRAISER PURSUANT TO CHAPTER 475, FLORIDA STATUTES, PLEASE PROVIDE THE FOLLOWING INFORMATION:

DESIGNATION: _____

LICENSE OR CERTIFICATION NUMBER: _____

DATE LICENSED OR CERTIFIED: _____

LIST EACH INSTANCE IN WHICH YOU HAVE BEEN FINED, REPRIMANDED, PLACED ON PROBATION, DISCIPLINED OR OTHERWISE PREVENTED FROM CONDUCTING BROKER OR APPRAISAL SERVICES BY THE FLORIDA REAL ESTATE COMMISSION OR THE FLORIDA REAL ESTATE APPRAISAL BOARD:

LIST EACH ORGANIZATION, RECOGNIZED BY THE REAL ESTATE APPRAISAL INDUSTRY OR THE PROFESSIONALS IN THAT FIELD, IN WHICH YOU ARE CURRENTLY OR HAVE PREVIOUSLY BEEN A DESIGNATED MEMBER:

ORGANIZATION	DESIGNATION	DATE RECEIVED DESIGNATION	MEMBERSHIP NUMBER

NOTE: PLEASE PROVIDE SUPPORTING DOCUMENTATION TO VERIFY EACH DESIGNATION LISTED. APPLICATIONS WILL NOT BE CONSIDERED UNTIL VERIFICATION IS RECEIVED BY THE OFFICE OF THE COUNTY ATTORNEY.

LIST THE REQUIREMENTS, INCLUDING EXPERIENCE AND EDUCATION, NECESSARY TO OBTAIN EACH DESIGNATION LISTED ABOVE:

6. DESCRIBE EXPERIENCE YOU HAVE APPRAISING TANGIBLE PROPERTY:

7. LIST ANY EXPERIENCE AND/OR SPECIALTY FOR THE FOLLOWING PROPERTY TYPE(S):

PROPERTY TYPE	EXPERIENCE/SPECIALTY
RESIDENTIAL REAL PROPERTY	
COMMERCIAL REAL PROPERTY	
TANGIBLE PROPERTY	
OTHER (PLEASE SPECIFY)	

8. IF YOU HAVE PREVIOUSLY SERVED AS A SPECIAL MAGISTRATE, PLEASE PROVIDE THE FOLLOWING INFORMATION:

COUNTY	DATES SERVED

IF APPLICABLE, EXPLAIN WHY YOU NO LONGER SERVE AS A SPECIAL MAGISTRATE IN THE ABOVE COUNTIES:

LIST EACH INSTANCE IN WHICH YOU HAVE BEEN DISMISSED, TERMINATED OR DENIED APPOINTMENT AS A SPECIAL MAGISTRATE FOR POOR OR IMPROPER PERFORMANCE:

9. LIST ANY PERSONAL OR BUSINESS RELATIONSHIP YOU HAVE EVER HAD WITH ANY OFFICER OR EMPLOYEE OF THE OFFICE OF THE PROPERTY APPRAISER, OFFICE OF THE CLERK OF THE CIRCUIT COURT, OFFICE OF THE COUNTY ATTORNEY OR THE VALUE ADJUSTMENT BOARD:

10. LIST ANY ADDITIONAL INFORMATION WHICH MAKES YOU QUALIFIED TO SERVE AS A

SPECIAL MAGISTRATE;

11. PLEASE PROVIDE A WRITING SAMPLE. THIS SAMPLE MAY CONSIST OF AN OPINION LETTER, APPRAISAL OR OTHER DOCUMENTATION THAT CONTAINS ONE (1) OR MORE WRITTEN PAGE(S) OF ORIGINAL MATERIAL.

THE UNDERSIGNED CERTIFIES, UNDER PENALTY OF DISQUALIFICATION FROM CONSIDERATION, THAT EACH ITEM CONTAINED IN THIS APPLICATION, OR IN ANY OTHER DOCUMENT FURNISHED BY OR ON BEHALF OF THE APPLICANT IS TRUE AND COMPLETE AS OF THE DATE IT BEARS. THE UNDERSIGNED AUTHORIZES THE VALUE ADJUSTMENT BOARD TO OBTAIN INFORMATION FROM OTHER SOURCES TO VERIFY EACH ITEM CONTAINED HEREIN. THE UNDERSIGNED ACKNOWLEDGES THAT IF SELECTED HE/SHE WILL FOLLOW ALL REQUIREMENTS AND MANDATES OF LAW IN FULFILLING THE DUTIES OF SPECIAL MAGISTRATE TO THE VALUE ADJUSTMENT BOARD.

SIGNATURE OF APPLICANT

DATE