

City of Asheville
BOARDS & COMMISSIONS
Application Form

Applicants are strongly urged to attend several meetings of a board prior to applying

Name of board or commission: NEIGHBORHOOD ADVISORY COMMITTEE (28801 Zip)

Your name: Karl Knight Home Phone #: 8287128303

Street address: 40 Walton St. City: Asheville Zip Code: 28801

Mailing address (if different): _____

Employer: Asheville Bookkeep LLC

Your position: Owner Office Phone #: 8287128303

Resident of City Yes County Buncombe Race White * Gender Identity: (non-trans) man *

Are you a Homeowner or a Renter? * Homeowner Age: 38

Residence location (check one): Central ☒ North _____ South _____ East _____ West _____

Are you aware of any potential conflicts of interest that may arise during your service on this board (i.e., property interest, business interest, etc.)? If so, please explain: _____
_____. Potential conflicts of interest do not preclude appointments.

Please indicate the area(s) of expertise that you can bring to the above board(s), and then in detail list education, experience, reasons for your interest, and other factors that support your interest in serving **Applicants are encouraged to provide a cover letter and/or a brief resume. Please use additional sheets if necessary.**

Please see attached Cover Letter and Resume.

Return to:

City Clerk's Office
PO Box 7148
Asheville, NC 28802-7148

Email: boards@ashevillenc.gov
Telephone: 259-5839
Fax #: 259-5499

Signature: _____

eSigned via SeamlessDocs.com
Thomas Karlton Knight
Key: dF7e721a8fe98f4d2aa1f402f0fc5878

Date: April 29, 2022

E-Mail: karl@ashevillebookkeep.com

Fax #: _____

* This information is requested for the sole purpose of assuring that a cross section of the community is appointed.