

**Profile**

Prefix Robert First Name Peterson Last Name  Suffix   
 Street Address [Redacted] Suite or Apt [Redacted]  
 City [Redacted] State [Redacted] Postal Code [Redacted]  
 Email Address [Redacted]

Employer Peterson Window Cleaning, Inc. Occupation Owner/President

District 19  
 What district do you live in? [Redacted]  
 Primary Phone [Redacted] Alternate Phone [Redacted]

**Interests \***

Public Safety

**Volunteer Activities**

**Which Boards would you like to apply for?**

Suburban Fire Protection District Board of Trustees: Middletown

**Past Service on City and County boards and Commissions?**

Yes  No

**If Yes, Please List**

---

**Are you employed by Louisville Metro Government?**

---

Yes  No

**Do you or a member of your immediate family have ownership interest in any company that does business with Louisville Metro Government?**

---

Yes  No

**Do you or a member of your immediate family have ownership interest in any property that is the subject of a condemnation proceeding, planning and zoning proceeding or any other administrative or court proceeding in which Louisville Metro Government or its agencies are interested parties?**

---

Yes  No

**Do you have any contract or matter pending before any Louisville Metro Government agency?**

---

Yes  No

**Have you ever been sued by the former City of Louisville, Jefferson County or Louisville Metro Government?**

---

Yes  No

**Additional Notes**

---

Question applies to Planning Commission.

**Do you have any direct financial interest in the land development and construction industry?**

---

Question applies to Planning Commission.

**Do you or a member of your immediate family have ownership interest in any property that is the subject of a condemnation proceeding, planning and zoning proceeding or any other administrative or court proceeding in which Louisville Metro Government or its agencies are interested parties?**

---

---

## Background Check



Please enter the last four digits of your social security number. This is protected and will not be shared.

**I authorize Louisville Metro Government and the Administrative Office of the Courts to search public records for any relevant information regarding me.**

---

Yes  No

---

Please enter Maiden/Previous Names, if applicable.

---

## Demographics

**Caucasian (non-Hispanic)**

---

Ethnicity

**Independent**

---

Political Party

**Male**

---

Gender



Date of Birth

---