Profile

Mr	William	Jacob		
Prefix	First Name	Last Name		Guffix
			Construction of the second	
Street Address			Suite or Apt State	
			Oldio	
City				Postal Code
10 TO				
Email Address				
UPS Retir	ed	Occupation		
		Cocupation		
What dis	trict do you live in? *			
	t 20			
manufacture des transference de la Constitución				
Primary Phone		Alternate Phone		
Interests	*			
✓ Public	Health			
Voluntee	r Activities			
To many t	o list			
Which B	oards would you like to	apply for?		
Air Pollution	on Control District Board: S	Submitted		
Past Ser	vice on City and County	boards and Commissions?		
• Yes c	No			
If Yes, PI	ease List			

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Member of the Louisville Air Pollution Control Board

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?
Have you ever been sued by the former City of Louisville, Jefferson County or Louisville Metro Government?
○ Yes ○ No
Additional Notes
Upload a Resume

Background Check



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

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search public records for any relevant information regarding me.				
⊙ Yes ○ No				
Please enter Maiden/Previous Names, if applicable.				
Demographics				
Ethnicity *				
Political Party *				
Gender *				
✓ Male				
Date of Right				

I authorize Louisville Metro Government and the Administrative Office of the Courts to

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