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## Profile

Mr                      Christopher                      Fuller                      \_\_\_\_\_  
Prefix                      First Name                      Last Name                      Suffix

\_\_\_\_\_  
Street Address                      Suite or Apt

\_\_\_\_\_  
City                      State                      Postal Code

\_\_\_\_\_  
Email Address

K. Norman Berry Associates                      Architect  
Architects PLLC                      Occupation  
Employer

### What district do you live in? \*

District 8

\_\_\_\_\_  
Primary Phone                      Alternate Phone

### Interests \*

- Business Development
- Codes/Regulations
- Economic Development
- Historical Preservation
- Housing
- Land Development
- Neighborhoods
- Public Health
- Public Safety
- Zoning

### Volunteer Activities

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

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Landmarks Commission: Submitted

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

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Yes  No

**If Yes, Please List**

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

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Yes  No

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

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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?**

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Yes  No

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

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Yes  No

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

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Yes  No

**Additional Notes**

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Upload a Resume

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## 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

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Please enter Maiden/Previous Names, if applicable.

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## Demographics

### Ethnicity \*

Caucasian/Non-Hispanic

### Political Party \*

Democrat

### Gender \*

Male



Date of Birth