

FORM C

CONTACT INFORMATION FOR AUTHORIZED REPRESENTATIVES

Name of Government: City of North Port

Mailing Address: 4980 City Center Blvd
North Port, FL 34286

Authorized Representative Contact Information

Primary Authorized Representative

Name: Eric Tiefenthaler
Title: Emergency Manager
Address: 4980 City Center Blvd North Port, FL 34286
Day Phone: 941-240-8165 Night Phone: 941-223-9683
Facsimile: 941-240-8183 Email: etiefenthaler@cityofnorthport.com

1st Alternate Authorized Representative

Name: Scott Titus
Title: Fire Chief
Address: 4980 City Center Blvd North Port, FL 34286
Day Phone: 941-240-8150 Night Phone: 941-724-7840
Facsimile: 941-240-8183 Email: stitus@cityofnorthport.com

2nd Alternate Authorized Representative

Name: Peter Lear
Title: City Manager
Address: 4970 City Hall Blvd, North Port, FL 34286
Day Phone: 941-429-7076 Night Phone: 941-628-8788
Facsimile: 941-429-7079 Email: plear@cityofnorthport.com

*****PLEASE UPDATE AS ELECTIONS OR APPOINTMENTS OCCUR*****