APPLICATION FOR APPOINTMENT TO VACANT CITY COMMISSION SEAT

Vacant Seat: ☐ Mayor ☑ Commissioner – District 5

Date Submitted: November 25, 2025

1. APPLICANT INFORMATION

Full Legal Name: Susan Patricia Harrison

Residential Address (must be within the City of Key West):
820 WASHINGTON ST, Apt 4, Key West, FL

Mailing Address (if different):

Phone Number: 305-395-8467

Email Address: sueph-kw@comcast.net

Are you a registered voter in the State of Florida? ☑ Yes ☐ No

County of Registration (Monroe County if Key West address): MONROE

Length of continuous residency within the City of Key West (minimum 1 year required by Charter): 19 years

2. ELIGIBILITY CERTIFICATION (KEY WEST CITY CHARTER §3.02)

☑ I certify that I am a resident of the City of Key West.

☑ I certify that I have resided in the City of Key West continuously for at least one year prior to qualification.

☑ I certify that I am a registered voter in Monroe County, Florida.

☑ I certify that I am qualified to hold public office under Florida law.

☑ I certify that I am not currently disqualified under any provision of Florida Statutes, the Key West Charter, or City ordinances.

3. PROFESSIONAL AND CIVIC BACKGROUND

Current Occupation/Employer:
Retired

Relevant Professional Experience:
21 Years with the City of Key West in the City Clerks Office, Retired As Senior Deputy City Clerk. I Am Familiar with the City's Code of Ordinances, Land Development Regulations And Bid procedures.

Community Involvement / Volunteer Service in Key West:
Historic Florida Keys Foundation, Key West Cemetery Strolls Volunteer
City Holiday Parade Volunteer since 1998
Member of the Key West Business Guild
Member of the Key West Art & Historical Society

Prior Public Service (City Boards, Committees, or other governmental experience):
Served As A member of the City Charter & District Boundary Review Committee - Appointed by Commissioner Hoover, From June 2021 to February 2022.
Ambassador Class 32 graduate - 2019

4. STATEMENT OF INTEREST

Explain why you are seeking appointment to the Key West City Commission and what qualifications or priorities you would bring:
From my experience in the City Clerks Office I understand the value of confidentiality and being impartial, Acquiring All the information available in order to make the best decisions for the City. My wish is to fill the seat For District 5 that Commissioner Hoover held with As much thoughtfulness and compassion that she demonstrated throughout her career.

5. POTENTIAL CONFLICTS OF INTEREST

Do you or any immediate family member have any financial, contractual, or organizational interests involving the City of Key West that could present a conflict? ☐ Yes ☑ No

If yes, please explain:

6. REFERENCES (Optional)

Name: Clayton Lopez Phone: 305-797-3584 Relationship: friend

Name: Cheri Smith Phone: 305-797-8922 Relationship: friend

Name: Jimmy Weekley Phone: 305-797-1440 Relationship: friend

APPLICANT CERTIFICATION AND SIGNATURE

I certify that all statements in this application are true and complete. I authorize the City of Key West to verify this information.

Applicant Signature: Susan P. Harrison Date: 11-25-25

CITY CLERK VERIFICATION

I, Kevi O'Brien, the duly authorized City Clerk of Key West, have reviewed the eligibility of the applicant listed above.

Based on City records, the applicant:

☑ Resides in District V based on the review of their Florida Driver's License and Residency Affidavit.

☑ Is a registered voter in Monroe County, Florida.

Clerk Signature: [signature] Date: 11.25.2025

THE CITY OF KEY WEST
POST OFFICE BOX 1409
KEY WEST, FL 33041-1409

AFFIDAVIT OF RESIDENCY TO QUALIFY FOR MAYOR & CITY COMMISSION

I, Susan P. Harrison hereby declare that I currently reside in, and maintain residence at 820 Washington St. Apt 4, Key West, FL within the City of Key West city limits. I further affirm that I have continuously lived within the city limits of the City of Key West, Florida for the last twelve months (from the date of Qualification) pursuant to City of Key West Charter 3.02. I recognize and declare my intent to maintain my permanent home within the city limits, and in the district for which I am elected.

I understand that pursuant to the City of Key West Charter 3.02, a Commissioner can forfeit office if at any time during the term of office they lack any qualification for the office, as determined by the City Commission for the City of Key West including the requirement of maintaining permanent residence within the City of Key West city limits, and the district for which I am elected.

I understand that the City of Key West may request I provide documentation proving my current residency within the City and district, and residency for the twelve months prior to this date and if necessary the City may verify the authenticity of any such documentation with outside agencies and further research my qualifications. By way of example, proof of residency documentation may include but is not limited to a Florida Driver's License, deed or lease of a residence within the City, utility or other bill, and will be determined on a case-by-case basis.

I acknowledge that this sworn affidavit is given pursuant to The City of Key West and/or the Supervisor of Elections and that any person who falsely swears or affirms any oath or affirmation to a public official commits a misdemeanor pursuant to F.S. 837.06

FURTHER AFFIANT SAYETH NAUGHT.

Susan P. Harrison
Signature

Print: Susan P. Harrison

SUBSCRIBED AND SWORN to before me on this 25th day of November 2025, by Susan Harrison, who is X personally known to me OR produced _____ type of identification.

(SEAL)

NOTARY PUBLIC

KERI L. O'BRIEN
Commission # HH 431883
Expires September 5, 2027