



City of Chicago
 Department of Planning and Development
Special Service Area (SSA)
PART 2 SSA Commission Application Documents

8/07

Completing the SSA Commissioner Application

Now that you have been nominated for your local SSA Commission, you will need to complete 3 documents:

1. **City of Chicago Board of Ethics Statement of Financial Interests** (separate document) The Governmental Ethics Ordinance requires SSA Commissioners to file an annual Statement of Financial Interests with the Board of Ethics. After your initial year of service, each spring the Board of Ethics will mail you a current form.
2. **Principal Profile Form** (see below) Information on the Principal Profile Form is used to prepare an indebtedness report through the Department of Revenue for City debt (parking tickets, administrative hearings, etc.)
3. **Affidavit of Child Support Compliance** (separate document) The Department of Consumer Services Child Support Compliance Program screens people for child support compliance. All candidates must complete this Affidavit regardless of whether one has children or not.

The City of Chicago makes every effort to keep your information confidential. In the event either department finds indebtedness, the Department of Planning and Development (DPD) will notify you. You will then work with the respective department directly in resolving your debt.

Completed Applications include : Part 1 Application and resume; Part 2 Documents: Ethics Statement, Principal Profile Form, Affidavit of Child Support Compliance, and cleared indebtedness reports. Letters(s) of Aldermanic support will be secured by your SSA Service Provider and forwarded to DPD.

For questions or more information, contact your local Alderman, SSA Service Provider, or:

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 Annie Coakley, Assistant to the Commissioner, DPD, PH 312-744-8280 Email: anne.coakley@cityofchicago.org

- PLEASE TYPE OR PRINT CLEARLY; COMPLETE INFORMATION REQUIRED -

Date Completed: _____ SSA Name/Number: _____

First Name: _____ Middle: _____ Last Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone (Day): _____ Fax (Day): _____

Date of Birth: _____ Social Security Number: _____ - _____ - _____

Driver's License Number: _____ State Issued: _____

License Plate Number(s): _____ State Issued: _____