

FREELAND WATER AND SEWER DISTRICT

5492 S. Harbor Avenue
P.O. Box 222
Freeland, WA 98249

Phone (360) 331-5566

Fax (360) 331-7525

APPLICATION FOR APPOINTMENT

Date: _____

Type or print clearly and return completed form to: Freeland Water & Sewer District by June 3rd, 2011.

I wish to be considered for appointment to the Freeland Water & Sewer District Citizens Advisory Committee.

Name: _____

Address: _____ City: _____ Zip _____

Phone, Day: _____ Night: _____ Email: _____

Property Owner: _____ Yes _____ No

Reside in District: _____ Yes _____ No

Available to attend meetings: _____ Evenings _____ Daytime

Present employer/occupation (if retired, please indicate former occupation): _____

Occupational History/background: _____

Professional/community activities (orgs, clubs, service, etc): _____

What experience and talents would you bring to this committee: _____

Describe why you are interested in serving on this committee: _____

Signature: _____ Date: _____

Note: Upon submission, all information on this form becomes public record. For further clarification regarding this application or more information, please call the Freeland Water & Sewer District @ (360) 331-5566.