



**CITY OF CLARKSTON
PLANNING & ZONING COMMITTEE APPLICATION**

DATE OF APPLICATION _____

NAME: _____

HOME ADDRESS: _____

HOME PHONE: _____ CELL PHONE: _____

E-mail ADDRESS: _____

LENGTH OF RESIDENCY IN CLARKSTON: _____

IF EMPLOYED, PLEASE LIST WHERE YOU WORK AND POSITION YOU HOLD: _____

PLEASE ATTACH A LETTER OF INTEREST INCLUDING, BUT NOT LIMITED TO, THE FOLLOWING:

- Why you wish to be considered for appointment to the Planning & Zoning Committee
- Your relevant experience and knowledge

The information provided will be used by the Mayor to make a nomination and for the City Council to consider for appointment, when a vacancy exists on the Planning & Zoning Committee. If there is no vacancy, your application will be kept on file for one year for consideration should an opening occur.

Thank you for your willingness to serve your local government and community.