

SUSANVILLE SANITARY DISTRICT

Application for Appointment to the Board of Directors

Is your primary residence within the District's service area boundary? yes no

Name _____

Business Address _____

Home Address _____

Mailing Address (if different) _____

Business Phone () _____ Home Phone () _____

Business, occupation, profession, etc. _____

State your qualifications for serving on the Board of Directors:

Community Activities and Organizational Affiliations:

Reason for desiring to serve on the Board of Directors (please be as specific as possible):

Signature of Applicant

Date

PLEASE RETURN APPLICATION TO SUSANVILLE SANITARY DISTRICT
GENERAL MANAGER, STEVE STUMP
45 S. ROOP STREET, SUSANVILLE, CA 96130
(530) 257-5665