



**TOWN OF FARMINGTON
BOARD AND COMMITTEE APPLICATION**

For Office Use Only

Date Received _____
Time Received _____

NAME: _____

ADDRESS: _____

TELEPHONE: Home _____ Work _____ Cell _____

OCCUPATION _____ **E-Mail Address** _____

OTHER BOARDS/COMMITTEES SERVED ON: _____

HOW MANY YEARS HAVE YOU RESIDED IN THE TOWN OF FARMINGTON? _____

INDICATE THE BOARD /COMMITTEE UPON WHICH YOU WISH TO SERVE:

- _____ Board of Appeals (7 members, 3-year term)
- _____ Board of Appeals, Alternate Member (2 members, 1-year term)
- _____ Board of Assessment Review (5 members, 3-year term)
- _____ Budget Committee (11 members, 3-year term)
- _____ Budget Committee, Alternate Member (2 members, 1-year term)
- _____ Conservation Commission (7 members, 3-year term)
- _____ Conservation Commission, Associate Member (Unlimited members, 1-year term)
- _____ Downtown T.I.F. Advisory Committee
- _____ Odor Panel (5 Members)
- _____ Parking Ordinance Committee
- _____ Planning Board (7 members, 3-year term)
- _____ Planning Board, Alternate Member (2 members, 1-year term)
- _____ Recreation Committee (5 members, 3-year term)
- _____ Recycling Committee
- _____ Revolving Loan Board (5 members)
- _____ Town Report Committee
- _____ Transportation Advisory Committee
- _____ Zoning Board (5 members, 3-year term)
- _____ Zoning Board, Alternate Member (2 members, 1-year term)

Why do you feel the activities of the Board or Committee selected above are important to the Town of Farmington and what experience, knowledge or perspective do you think your participation will bring to the group? (Additional sheet may be used.)

APPLICANT'S SIGNATURE