WHITEWATER TOWNSHIP

5777 Vinton Road • P.O. Box 159 • Williamsburg, MI 49690 (231)
267-5141 • FAX (231) 267-9020

APPLICATION FOR APPOINTMENT

Date of Application: _____

Name:_____
Last First Middle Initial

Address: _____ **City:**_____ **Zip:**_____

Telephone: (Home) _____ (Cell)_____

E-Mail Address: _____

What Committees and/or Boards are you interested in?

(Select as many as you like)

Board of Review:_____ Park & Recreation Advisory Committee:_____

Planning Commission:_____ Zoning Board of Appeals:_____

Are you a Whitewater Township Resident? Yes No

Are you a Land Owner in Whitewater Township? Yes No

Are you a Qualified Elector (registered voter) of the Township? Yes No

As defined by the 1963 Michigan Constitution, as amended by the 26th Amendment of the U.S. Constitution

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Please describe your interest in the selected committee/board and how you feel your expertise and contribution would benefit the group:

_____

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Please provide any other information you wish to share.

_____
_____
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_____
_____
_____
_____

Complete, sign, and return this application to:

Whitewater Township Supervisor
P.O. Box 159, 5777 Vinton Road,
Williamsburg MI 49690,
Fax 231-267-9020
Email: supervisor@whitewatertownshipmi.gov

_____ _____

Applicant Signature **Date**