

**CHEHALIS RIVER BASIN SUB ZONE COMMITTEE
LEWIS COUNTY, WASHINGTON**

APPLICATION FORM

Name: _____

Address: _____
Street address/P O Box City (phone)

Occupation: _____

Community Activities and Involvement: _____

Background and/or Interest in Flood Control Issues:

Please provide 2 or 3 names/phone numbers of individual who you would regard as "references."

Why do you wish to serve on this advisory committee?

Please provide any other information you feel might help us in deciding who should be on this advisory committee.

Signature

Date

PLEASE FEEL FREE TO ATTACH ANY ADDITIONAL INFORMATION YOU DEEM PERTINENT. THANK YOU FOR YOUR INTEREST IN SERVING.

The application may also be downloaded at www.lewiscountywa.gov .
Completed applications must be returned to the Lewis County Commissioners Office, 351 NW North St., Chehalis, WA 98532 by **April 9, 2010, at 5:00 p.m.**
Thank you.