



**CITY OF MAPLE VALLEY
COMMUNITY SERVICES APPLICATION**

PLANNING COMMISSION

(Please print or type)

Name: _____

Home Address: _____ Home phone: _____

Cell Phone: _____ Email address: _____

Work Address: _____ Work Phone: _____

NOTICE
Each applicant will be interviewed in public by City Council prior to the Council meeting

***Select the following that apply (you may select more than one if applicable).**

- I am a resident of the City of Maple Valley
- I own property within the city limits of Maple Valley
- I own a principal business within the city limits of Maple Valley and
 - my principal business is licensed by the State of Washington and
 - I hold a local business license *(if applicable)*

***Select the following areas of interest in which you have demonstrated training, experience or actions (you may select more than one if applicable).**

- Environmental Affairs
- Planning
- Land Use
- Residential and commercial development

Please answer the following questions:

1. List your educational background.

2. Please state your occupational background, beginning with your current occupation and employer (may attach resume).



COMMUNITY SERVICES APPLICATION
PLANNING COMMISSION (Cont.)

Attendance & Training Requirements

Appointments to this commission will require your consistent attendance at regularly scheduled meetings. Are you able to meet this requirement?

Daytime meetings (a check indicates yes) Evening meetings (a check indicates yes)

Appointment to this commission will require you complete Open Public Meetings Act and Public Records Act training within the first 30 days following appointment. Are you able to meet this requirement? (a check indicates yes)

Please return this application by the deadline, by mail, to:

**City of Maple Valley
Attention: City Clerk
P. O. Box 320
Maple Valley, WA 98038
Phone: 425-413-8800
Fax: 425-413-4282**