

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Date Received: \_\_\_\_\_  
Staff Initial: \_\_\_\_\_

## PLANNING COMMISSION APPLICATION

### ***REQUIREMENTS:***

***MUST be able to attend a minimum of one evening meeting per month and additional meetings as necessary.***

1. Why are you interested in this position?
2. What talent or expertise do you feel you could offer in this position?
3. How do you feel about the City of Avon and how it is currently being run?
4. What specific project or area do you want to affect or improve in the City of Avon?

