



**CITY OF COACHELLA
UTILITY USERS TAX
CITIZENS OVERSIGHT COMMITTEE**

NAME: _____

ADDRESS: _____

TELEPHONE: _____

TO BE ELIGIBLE FOR APPOINTMENT TO THE COMMISSION YOU MUST BE A RESIDENT OF THE CITY OF COACHELLA. PLEASE FILL OUT ONE OR MORE OF THE LINES BELOW AND THE APPROPRIATE INFORMATION:

RESIDENT OF COACHELLA: _____ **YEARS**

WORK IN COACHELLA: _____ **YEARS**

OWN A BUSINESS IN COACHELLA: _____ **YEARS**

NAME OF EMPLOYER/BUSINESS: _____

ADDRESS OF EMPLOYER/BUSINESS: _____

TELEPHONE OF EMPLOYER/BUSINESS: _____



PLEASE FURNISH BRIEF RESPONSES TO THE QUESTIONS BELOW:

1. Why do you think you should be appointed?

2. What special qualities can you bring to the Commission? What is there in your background, training, education and interests that qualify you as a candidate?

3. Do you have any questions or comments about the UUT or the Advisory Commission and its structure or functions?

4. Any other comments and/or ideas as to how you as a member of the Utility Users Tax Advisory Commission could benefit and improve the quality of life in the City of Coachella.

Date

Signature



PLEASE MAIL OR RETURN IN PERSON THIS COMPLETED APPLICATION TO:

City Clerk, City of Coachella
1515 Sixth Street, Coachella, CA 92236