



**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?

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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?

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

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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.

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Date

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Signature



**PLEASE MAIL OR RETURN IN PERSON THIS COMPLETED APPLICATION TO:**

Andrea Carranza, Deputy City Clerk  
City of Coachella  
1515 Sixth Street, Coachella, CA 92236