

TOWN OF PORT DEPOSIT APPLICATION FOR APPOINTMENT - BOARD/COMMISSION/COMMITTEE

Instructions: Please complete this form and mail to: Town of Port Deposit, 64 S. Main Street, Port Deposit, MD 21904, or fax to: 410.378.9104. To request the form via email contact Town Hall at 410.378.2121.

The Mayor and Council will review the following information for your possible appointment to a board/commission/committee. Your information will be kept on file in our office. Appointees serve without compensation.

Please check your interest(s):

	Board of Appeals	Meets as needed to hear applications for a variance or special exceptions, an appeal of an order, decision, requirement, or interpretation of the Zoning Ordinance made by the Zoning Inspector, Planning Commission, Historic Area Commission or Town Administrator. Town Resident - three year term
	Board of Elections	Meets when necessary to supervise the registration of voters, nomination procedures and Town elections. Member must be a qualified voter & shall not hold or be candidates for any elected office. Must be a qualified voter and resident of the Town – four year term
	Historic Area Commission	Meets monthly to review zoning and construction applications for compliance with the Standards of Historical Restoration guidelines. Majority of the Commission must reside in the Town – three year term
	Planning Commission	Meets monthly to hear and decide applications for land development and approve subdivision plats and site development plans. Town Resident – three year term
	Visitor Center & Turtle Habitat	Volunteer opportunity to work with the public at the Visitor Center/Turtle Habitat in Marina Park. Flexibility to schedule part time and training is provided. Open May-Sept, Saturday – Sunday, 12:00 p.m.-4:00 p.m.

Requirements to serve:

- Town Resident for at least 1 year – unless otherwise noted.
- Does not serve on another board/commission/committee
- Does not have an immediate family member serving on Town Council or another board/commission/committee
- A few hours per month to serve your community

Name: _____ Address: _____

Phone - Home: _____ Work: _____ Cell: _____

Email: _____

_____ **Resume attached, or fill out the information below.**

Occupation: _____

Place of employment: _____

Education/Background: _____

Affiliations (Civic/Organizations): _____

Special Interests: _____

Other Pertinent Information: _____

To the best of my knowledge, the information submitted is correct and will be used by the Mayor and Council of the Town of Port Deposit in considering my nomination to a board/commission/committee.

Signature: _____ Date: _____

If you have any questions or need more information please contact Town Hall at 410.378.2121. Thank you for interest in Town of Port Deposit.