



City of Molalla
Application for Appointment to Wastewater Facility & Collection
System Master Plan Advisory Committee (PAC)

Date:

Name:	
Address:	
Home Phone:	
Work Phone:	
E-Mail:	
Years of Residence Inside City	
Years of Business Ownership Inside City	
Years of Residence Inside Urban Growth Boundary	

Current or Previous Community Affiliations or Activities:

Why would you like to serve on this committee and give any other background you might have in this area?

What transportation related items are you most interested?

***Signature:**