



**STORM WATER ADVISORY COMMITTEE (SWAC)
CITIZEN VOLUNTEER APPLICATION**

Thanks for your interest in the SWAC. Please complete and mail this volunteer application to the address below. SD1 will contact you with a meeting schedule and other committee information.

Send completed application to:

Sanitation District No. 1
Attn: Lora Bonno
1045 Eaton Drive
Ft. Wright, KY 41017

Volunteer Information:

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Cell Phone: _____

Fax: _____ E-mail: _____

Application Questions:

1.) Why are you interested in participating in the SWAC?

2.) What do you hope to gain from your participation in the SWAC?

Agreement:

By signing, the applicant agrees that if selected for membership he or she will demonstrate a serious commitment to meaningful participation in the Storm Water Advisory Committee, with an emphasis on thoughtful discussion, collaborative problem-solving, a respect for diversity of opinion and a common desire for continued success of the Northern Kentucky region. The applicant agrees to make every effort to attend all regularly scheduled committee meetings. Any signatory may withdraw from the process at any time if they choose to do so.

Signature of Applicant: _____