



**APPLICATION FOR APPOINTMENT
TO THE
DEERFIELD REGIONAL STORM WATER
DISTRICT**

Name: _____

Mailing Address: _____

Home Phone: _____

Mobile Phone: _____

Work Phone: _____

Email: _____

Preferred Contact Method: _____

The **Deerfield Regional Storm Water District** is comprised of three regular members. The District's responsibilities include handling storm water complaints, implementing OEPA required activities compliant with the most recent permit for municipal activities, overseeing the Township's storm water management plan, and overseeing storm water improvement projects.

Specific information relating to the function of the Deerfield Regional Storm Water District can be found at www.deerfieldstormwater.com

The District meets regularly on the second Tuesday of each month; with the possibility of some special meetings throughout the year. Board members receive a stipend of \$50 per meeting they attend, at the end of each year.

QUESTIONS:

How many years have you resided in Deerfield? _____

In what community activities have you been involved (i.e. school, recreation, church, local government)? _____

What education, vocational, or practical experience do you possess that may be relevant to your service on this Board? _____

Why do you wish to be appointed to this position? _____

Please list three references (name and phone number)

By providing your signature below you acknowledge that the information provided is accurate.

_____ DATE _____

Please submit the application to the Public Works Department by email at bhigh@deerfieldtwp.com, by fax at 513.701.6980 or by mail or in person at Deerfield Township, 4900 Parkway Drive, Suite 150, Mason, Ohio 45040