

# WHITEWATER TOWNSHIP

5777 Vinton Road • P.O. Box 159 • Williamsburg, MI 49690 (231)  
267-5141 • FAX (231) 267-9020

## APPLICATION FOR APPOINTMENT

**Date of Application:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
Last First Middle Initial

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Telephone:** (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

### What Committees and/or Boards are you interested in?

(Select as many as you like)

Board of Review: \_\_\_\_\_ Park & Recreation Advisory Committee: \_\_\_\_\_

Planning Commission: \_\_\_\_\_ Zoning Board of Appeals: \_\_\_\_\_

**Are you a Whitewater Township Resident?** Yes No

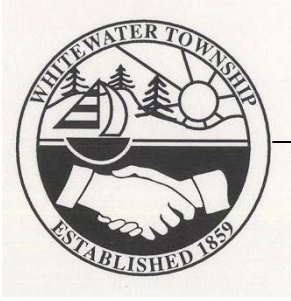
**Are you a Land Owner in Whitewater Township?** Yes No

**Are you a Qualified Elector of the Township?** Yes No

As defined by the 1963 Michigan Constitution, as amended by the 26<sup>th</sup> Amendment of the U.S. Constitution

Please describe your interest in the selected committee/board and how you feel your expertise and contribution would benefit the group:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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Please provide any other information you wish to share.

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**Complete, sign, and return this application to:**

**Whitewater Township Supervisor  
P.O. Box 159, 5777 Vinton Road,  
Williamsburg MI 49690,  
Fax 231-267-9020  
Email: [supervisor@whitwatertownship.org](mailto:supervisor@whitwatertownship.org)**

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**