



HAYDEN LAKE SEWER DISTRICT
9393 N. STRAHORN RD., HAYDEN LAKE, ID 83835
Ph 208-772-4379 FAX 208-772-4456
Administrator@haydenlakesewerdistrict.org

APPLICATION FOR APPOINTMENT TO THE HAYDEN LAKE SEWER DISTRICT BOARD OF DIRECTORS

Name: _____

Residence Address: _____

Phone: _____

Email: _____

Current Employer & Position: _____

Are you a registered voter with Kootenai County Elections? _____

How long have you been a resident of the Hayden Lake Sewer District? _____

How long have you been a resident of Kootenai County? _____

Do you have any experience overseeing budgets? _____

List any government or associated government positions you have held or currently hold:

List any past or current community involvement:

Why do you wish to be considered for appointment to the Hayden Lake Sewer District Board of Directors, how do you view the role, and what could you contribute to the position?

Describe any experience you have in public utilities, wastewater collection, or treatment and discharge?

The Board meets twice per month; 9:00 am on the second Wednesday of the month and 4:00 pm on the fourth Wednesday of the month. Attendance is important to have a quorum and conduct business. Will you be available to attend these meetings either in person (preferred), via Zoom, or over the phone? _____

Signature: _____ Date: _____