

**CITY OF REDMOND
HISTORIC LANDMARKS COMMISSION**

Please type or print answers to the following questions and submit to the City Recorder at City Hall, 411 SW 9th St, Redmond, OR 97756. If you have any questions, please feel free to contact the City Recorder at (541) 923-7751. Thank you for your time and interest in the City of Redmond. Attach additional sheets if necessary.

I, _____, respectfully request to be considered as an applicant for a
(Please print first and last name)
position on the City of Redmond's HISTORIC LANDMARKS COMMISSION.

(Address)

(Home phone)

(Cell phone)

(E-mail)

(Occupation)

(Place of Employment)

The REDMOND HISTORIC LANDMARKS COMMISSION shall be composed of five members with interest, knowledge, or competence in historic preservation and who reside within the Redmond School District 2J boundary.

The purpose of the REDMOND HISTORIC LANDMARKS COMMISSION is to preserve and promote Redmond's history and culture by identifying, evaluating, and designating historic and cultural resources in the City of Redmond as landmarks; inform and educate the public on the historic and architectural significance of the designated landmarks; inform and educate the public on the value of preserving Redmond's historic and cultural resource; and solicit grants and other resources to help promote, advocate and undertake preservation projects in the City of Redmond.

What reasons do you have for wanting to be a member of this Commission? _____

Local history/historic preservation activities (publications, committee work, etc): _____

Do you have any experience in architecture, history, architectural history, planning, prehistoric and historic archeology, folklore, cultural anthropology, curation, conservation, and landscape architecture, or related disciplines. Please provide a brief outline of relevant experience and occupations.

What other boards / committees do you serve on? _____

What contributions do you feel you can make to the Commission? _____

Education: Colleges/Universities attended with degrees, areas of study and dates completed. _____

My signature affirms that the information in this application is true to the best of my knowledge. I understand that misrepresentations of facts are cause for removal from any advisory committee, board or commission I may be appointed to. I also understand that City policy requires disclosure of actual or potential conflicts of interest by persons appointed by the Mayor and Council. All information and documentation related to service on this commission is subject to public records disclosure.

(Signature)

(Date)