

MATANUSKA-SUSITNA BOROUGH
PLANNING DEPARTMENT

**COMPREHENSIVE PLAN/SPUD TEAM
COMMITMENT FORM**

PLANNING AREA _____ DATE _____

INFORMATION PROVIDED ON THIS FORM WILL BECOME PART OF THE PUBLIC RECORD.

GENERAL INFORMATION:

NAME: _____

MAILING ADDRESS: _____

PHYSICAL RESIDENCE: _____

TELEPHONE: (HM) _____ (WK) _____

E-MAIL: _____

BASIS FOR QUALIFICATION: CHECK ALL THAT APPLY

Res. 07-02AM - Planning Team will consist of 6-15 community representatives, borough staff, and agency representatives.

PROPERTY OWNER WITHIN PLANNING AREA _____
LIST PROPERTY _____

BUSINESS OWNER WITHIN PLANNING AREA _____
LIST BUSINESS NAME AND LICENSE NUMBER (OPTIONAL): _____

TENANT/RESIDENT WITHIN PLANNING AREA _____
PHYSICAL ADDRESS: _____

OTHER COMMUNITY REPRESENTATIVE _____
LIST ORGANIZATION: _____

AGENCY REPRESENTATIVE _____
LIST AGENCY: _____

BACKGROUND INFORMATION: CHECK ALL THAT APPLY.

YEAR ROUND RESIDENT _____

SEASONAL RESIDENT _____

NON-RESIDENT _____

(continued on other side)

BACKGROUND INFORMATION:

OCCUPATION, LIST: _____

LOCATION OF EMPLOYMENT: _____

LIST COMMUNITY ORGANIZATIONS YOU ARE A MEMBER OF: _____

LIST COMMERCIAL/BUSINESS INTERESTS YOU HAVE IN THE AREA: _____

LIST PERSONAL/RECREATIONAL INTERESTS YOU HAVE IN THE AREA: _____

ARE THERE OTHER INTERESTS OR CONCERNS YOU WILL BE REPRESENTING DURING THIS PLANNING PROCESS? _____

ATTITUDINAL QUALIFICATION:

WILL YOU MAKE THE VOLUNTARY COMMITMENT OF TIME TO BE AVAILABLE FOR ALL MEETINGS DURING THE PLANNING EFFORT (generally four hours per month)?

YES _____ NO _____

WILL YOU CONSIDER COMPROMISES THAT WILL HELP MANAGE CONFLICT BETWEEN COMPETING SEGMENTS OF THE COMMUNITY?

YES _____ NO _____

WILL YOU LISTEN TO AND CONSIDER TESTIMONY FROM THE PUBLIC AND OTHER GOVERNMENT AGENCIES AS IT AFFECTS THIS COMPREHENSIVE PLAN?

YES _____ NO _____

WILL YOU COMMIT TO DEVELOP A COMPREHENSIVE PLAN THAT WILL REPRESENT THE ENTIRE PLANNING AREA?

YES _____ NO _____

WILL YOU COMMIT TO DISTRIBUTE ACCURATE INFORMATION TO OTHER COMMUNITY MEMBERS AND CLARIFY MISUNDERSTANDINGS?

YES _____ NO _____

PLEASE MAKE ANY OTHER STATEMENTS SUPPORTING YOUR APPOINTMENT.

_____ SIGNATURE

THANK YOU FOR YOUR INTEREST. WE WILL ADVISE YOU AS SOON AS YOUR COMMITMENT FORM IS REVIEWED BY THE PLANNING COMMISSION.

MAIL AND/OR RETURN TO: MATANUSKA-SUSITNA BOROUGH
PLANNING AND LAND USE DEPARTMENT
350 E. DAHLIA AVENUE
PALMER, AK 99645
PH 745-9833; FAX 745-9876