Site Name: HWY 260 and Main Street

If you would like to be added to the site mailing list, please fill out the top portion of this form and return it to ADEQ. If you would like to apply to serve on the CAB, please also complete the bottom portion of this form.

First Name: __________________________ Last Name: __________________________
Organization / Association: ___________________________________________________________________
Address: ___________________________________________ Zip Code: ___________________
Mailing Address: (if different from above) ________________________________________________
Zip Code: __________________________ Email Address: __________________________________________
Occupation: __________________________ Employer: __________________________________________
Phone Numbers: (home:) __________________________ (work:) __________________________
(mobile:) __________________________ (other:) __________________________________________

Application for CAB Membership

How long have you lived in or near the Site? __________________________________________
Are you willing to make a commitment to serve on the CAB for at least 1 year? ______________
Are you able to attend at least four meetings a year? __________________________
What day(s) / time(s) would be best for you to attend meetings? __________________________

Please explain why you would like to serve on the CAB (attach a separate sheet if needed):
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Fold and tape to return this application to:
ADEQ, Community Involvement Coordinator – 6th Floor, 1110 West Washington, Phoenix, AZ 85007
or fax to (602) 771-4272. For more information, visit ADEQ’s Web site at www.azdeq.gov or 602-771-2300.

Updated 07/16