## Historic Resources Commission Application for Commission Member

Name:	
Address:	
<del></del>	Phone:
Email:	Cell Phone:
Employer:	Work Phone:
	rovide is done with the express understanding that it is dimay be provided to the public when requested.
Do you reside within the city limit If so, what District do you live in	
Please select at least one of the following:  □ I am a member of the Hollister Downtown Association  □ I am a member of the San Benito County Historical Society  □ I have a background in historic preservation, architecture, engineering, and construction  □ I am a resident or property owner in a historical district in the City  □ None of the above	
Describe your interest, experien	ce, or special knowledge in the area of historic preservation:
Please list any professional or co	ommunity organizations you belong to:
Do you or an immediate family may present a potential conflict	member have any professional or financial relationship that of interest for this commission?
The Historical Resource Commi a Historical Resource Commissi	ission is advisory to the City Council. Why do you wish to be ioner?
Date: Please attach cover letter, and	Signature: