

**NELSON TOWNSHIP APPLICATION**

**PLANNING COMMISSION – BOARD OF REVIEW – BOARD OF APPEALS**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Business or Cell Phone \_\_\_\_\_

How long have you lived in Nelson Township? \_\_\_\_\_

Why are you interested in serving on the Planning Commission/Board of Review/Board of Appeals? Please circle your interest. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are your concerns regarding township government and/or planning? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any experience in building, real estate, land development, land use etc.?

Please specify \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How would you like to see Nelson Township develop? \_\_\_\_\_

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What concerns do you have regarding land development, ordinances, ordinance enforcement, property assessments etc. within the township? \_\_\_\_\_

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Do you have any township environmental concerns? \_\_\_\_\_

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Would you be available to attend commission or board training and workshops?

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Please feel free to add any information you feel would be helpful to us in deciding upon whom should be appointed to any of these positions. Please include a resume' if available.

Thank you for your interest in Nelson Township government. Please send you completed form and resume' to my attention, 2 Maple Street, Box 109, Sand Lake, MI 49319 – or Email to: [supervisor@nelsontownship.org](mailto:supervisor@nelsontownship.org).

Supervisor, Nelson Township