



Devils Lake Water Improvement District

4006 NE West Devils Lake Road • Lincoln City, Oregon 97367
(541) 994-5330
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APPLICATION

Board Member Vacancy

I, _____, respectfully request to be considered as an applicant for a vacant position on the Devils Lake Water Improvement District Board of Directors.

Name: _____

Address: _____

Phone: (H) _____ (W) _____
(Cell) _____

Email: _____

Fax: _____

Do you own property in the District? _____ Are you a US Citizen? _____

Address: _____

Please provide a brief outline of your experience and philosophy which may assist the Board of Directors in a making a decision to fill this vacancy: (Attach other sheets as required).

Signed: _____ Dated: _____