



APPLICATION FOR PLANNING COMMISSION

Please fill out the following application, and attach any information you deem relevant.

Name: _____ Date: _____

Street Address: _____

Phone Number: _____ Email: _____

Current Occupation: _____ Employer: _____

Length of residence in Tappahannock: _____

Other Boards or Committees you would be willing to serve: _____

Why are you interested in serving in this position?

What experience do you bring to this position? _____

Do you have any special skills or expertise applicable to this position? _____

Educational/Occupation
background: _____

Additional information you would like to
provide: _____

Please return application to the Tappahannock Municipal Building 915 Church Lane Monday – Friday
from 8:30 a.m. to 4:30 p.m.

RETURN THIS APPLICATION TO:

**TOWN OF TAPPAHANNOCK
Patsy K. Scates
PO Box 266
Tappahannock, VA 22560**

Email: patsy.scates@tappahannock-va.gov

THANK YOU FOR YOUR INTEREST TO SERVE OUR COMMUNITY