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| Our Reference: | DOC/21/23122 |
| Prepared By: | Michele Bos |
| Date: | 14/10/2021 |



**EXPRESSION OF INTEREST FOR MEMBERSHIP AS A COMMUNITY REPRESENTATIVE ON THE WENTWORTH SHIRE COUNCIL FLOOD RISK MANAGEMENT COMMITTEE**

To: Ken Ross, General Manager

I wish to register my interest for membership as a Community Representative on the Wentworth Shire Council Flood Risk Management Committee.

I understand that:

* the membership includes voting responsibility as a Community Representative
* the committee will meet periodically as required
* the term of membership will be for a period of three (3) years

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| **EXPRESSION OF INTEREST - PERSONAL DETAILS** |
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| **Name**   |  | | --- | |  |      |  | | --- | |  |   **Company Name (if applicable)**   |  | | --- | |  |   **Postal Address**   |  | | --- | |  |   **Contact No.**  **Email**   |  | | --- | |  |   **Signature / Date**   |  | | --- | |  | |