



**CITY OF ELOY**

628 N. Main Street  
[www.elayaz.gov](http://www.elayaz.gov)  
Eloy, Arizona 85131  
(520)466-9201  
Fax: (520)466-3161

Date: \_\_\_\_\_

Dear Mayor and City Council members:

I, \_\_\_\_\_, would like to apply to be a member of the **Downtown**  
(print name)

**Advisory Commission.** I am:

A resident of Eloy (since \_\_\_\_\_ and presently reside at \_\_\_\_\_,  
(month/year) (address)  
\_\_\_\_\_.  
(City/State/Zip)

Not a resident of Eloy

The following information is being submitted for your consideration:

Civic Participation: (Clubs, offices held, etc.)

Additional Information:

I am interested in serving and/or am qualified to serve on the Downtown Advisory Commission because:

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Home/Cell Phone No.

\_\_\_\_\_  
Work Phone No.

\_\_\_\_\_  
Email address

-----DO NOT WRITE BELOW THIS LINE-----

APPOINTED BY COUNCIL \_\_\_\_ YES \_\_\_\_ NO      DATE APPOINTED \_\_\_\_\_

TERM EXPIRES \_\_\_\_\_      SIGNATURE \_\_\_\_\_