

Date of Action: 6/13/16	
Approved <input checked="" type="checkbox"/>	Denied <input type="checkbox"/>
By: <i>[Signature]</i>	

CITY COUNCIL ACTION MEMORANDUM

AM No. 16-19: Confirmation of Noel Lowe to the Airport Advisory Commission.

Originator: Mayor Bert L. Cottle

Date: 5/25/2016

Agenda of: 6/13/2016

Route to:	Department Head	Signature	Date
X	Public Works Director	<i>[Signature]</i>	5/25/16
X	Finance Director	<i>[Signature]</i>	5-25-16
X	Deputy Administrator	<i>[Signature]</i>	5/25/16
X	City Clerk	<i>[Signature]</i>	5/31/16

Reviewed by Mayor Bert L. Cottle: *[Signature]* 5:31:2016

Fiscal Impact: yes or no Funds Available: yes or no

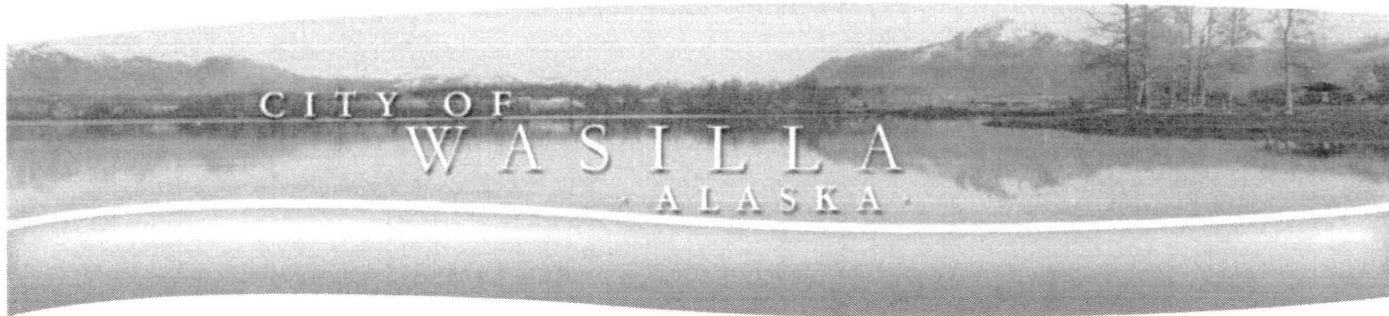
Account name/number/amount:

Attachments: Completed application for Noel Lowe (2 pages).

Summary Statement: Mayor Cottle requests the appointment of the following Commissioner; please confirm the appointment pursuant to Wasilla Municipal Code 2.44.030, as follows:

- AIRPORT ADVISORY COMMISSION:
- Noel Lowe, Seat A (six-month term to expire December 31, 2016)

Staff Recommendation: Adopt AM No. 16-19.



CITY OF WASILLA • OFFICE OF THE CITY CLERK • 290 E. HERNING AVENUE • WASILLA, AK 99654
PHONE: 907.373.9090 • FAX: 907.373.9092 • EMAIL: CLERK@CI.WASILLA.AK.US

APPLICATION FOR APPOINTMENT TO A CITY COMMISSION

Applications for City Commissions established by Wasilla Municipal Code are accepted in the Office of the City Clerk and remain on file for a period of two-years from the date of application. Commission members are appointed by the Mayor and confirmed by the City Council. Applicant names for a commission may be published in the newspaper and the merits of the appointment may be discussed during a public forum.

Return completed applications to the City Clerk. For detailed information about City Commissions, please visit the City's website at: www.cityofwasilla.com/commissions.

Position applying for select one or more of the following:

- Airport Advisory Commission (no residency requirement)
- Planning Commission (City of Wasilla residents only)
- Parks and Recreation Commission (4 City of Wasilla residents, 1 Mat-Su Borough Resident)

NAME: Noel Lowe

MAILING ADDRESS: P.O. Box 870578 Wasilla AK 99687

RESIDENCE ADDRESS: 550 Fallen Leaf Cir. Wasilla AK 99687

E-MAIL: _____

Do you regularly check your email? Yes or No

HOME PHONE: 907-240-1151 WORK PHONE: 907240-1151 CELL PHONE: 907-240-1151

OCCUPATION: Pawn Broker

EMPLOYER: Alaska Fast Cash

- Do you reside within Wasilla City limits? Yes or No If so, for how long? 20 Years
- Do you currently own or operate a business in the City of Wasilla? If so, what is the name and physical location of the business? No
- Does your schedule permit you to regularly attend required meetings? Yes or No

- Are you currently affiliated with the City of Wasilla in any way? (examples include: contractor, lease holder, employee) if so, please note the capacity: Former City Council
- Do you currently have a direct or indirect financial or business interest with the City of Wasilla? If so, please note: No

Please provide a brief statement describing your experience and involvement in City government that would qualify you for this position. You may submit a resume if you wish.

6 Years on City Council. I currently own a hanger at the airport and regularly utilize the airport

I understand that this is a voluntary, appointed position to be confirmed by the Wasilla City Council, and requires regular attendance at official meetings. I further understand that this application is public information and the merits of my appointment may be discussed at a public forum. In addition, my name may be published in a newspaper or other media outlet.

I have read Chapter 2.12 of the Wasilla Municipal Code defining financial interest, substantial financial interest, and conflict of interest. I agree to comply with the code and understand that my tenure as Commissioner requires such compliance.

I certify that the information in this application is true and accurate.

Signature of Applicant:  Date: 5/24/16

Date Received:
(date stamp below)

FOR OFFICE USE ONLY

Registered voter of the City: ___ yes ___ no City Resident: yes ___ no

Resume Attached: ___ yes

Date of Council Approval: _____ AM No.: _____

Date Applicant Notified: _____

RECEIVED

MAY 24 2016

Office of the City Clerk
City of Wasilla