



	Approved	Denied
Date Action Taken:	6/9/08	
Other:	Hailer, Carson, Mastic, Metvia - yes Menard & Woodruff - no	
Verified by:	D.M.K.	

WASILLA CITY COUNCIL ACTION MEMORANDUM

AM No. 08-33

TITLE: APPOINTMENT OF GREG KOSKELA TO SEAT A ON THE WASILLA PLANNING COMMISSION.

Agenda of: June 9, 2008

Date: May 14, 2008

Originator: Mayor Dianne M. Keller

Route to:	Department	Signature/Date
	Police Chief Youth Court, Dispatch, Code Compliance	
	Culture and Recreation Services Manager Library, Museum, Sports Complex	
	Public Works & Recreation Facility Maintenance Director	
X	Finance, Risk Management & MIS Director Purchasing	<i>Clayton Dean CFO</i>
X	Deputy Administrator Planning, Economic Development, Human Resources	<i>Mayor Dianne M. Keller</i>
X	City Clerk	<i>D.M.K.</i>

REVIEWED BY MAYOR DIANNE M. KELLER: *Dianne M. Keller 5/23/08*

FISCAL IMPACT: yes \$ _____ or no Funds Available yes no

Account name/number:

Attachments: Application for appointment

SUMMARY STATEMENT: Commissioner Colleen Sullivan-Leonard resigned from the Planning Commission, effective May 13, 2008. I wish to appoint Greg Koskela to fill the vacant seat. Pursuant to WMC 2.44.030.A, confirmation of the Council is required.

Planning Commission

Greg Koskela, Seat A

Term expiration: December 31, 2008

ACTION: To confirm the appointment of Greg Koskela to Seat A on the Wasilla Planning Commission.



OFFICE OF THE CITY CLERK
CITY OF WASILLA
290 E. HERNING AVE.
WASILLA, AK 99654-7091
PHONE: (907) 373-9090
FAX: (907) 373-9092

RECEIVED

MAR 18 2008

OFFICE OF THE CITY CLERK
CITY OF WASILLA

APPLICATION FOR APPOINTMENT TO COMMISSION

RECEIVED

POSITION APPLYING FOR (select from one or more of the following):

- Airport Advisory Commission (no residency requirement)
- Planning Commission (City of Wasilla residents only)
- Parks and Recreation Commission (City of Wasilla residents only)

MAR 1 2008

OFFICE (CIT)

MARK

NAME: Gregory A. Koskela

MAILING ADDRESS: 1534 West Lake Avenue Dr, Wasilla, AK

RESIDENCE ADDRESS: Same as above

HOME PHONE: 907-373-0449 WORK PHONE: 232-1286

CELL PHONE: 232-1286 E-MAIL: Gkoskela@mtaonline.net

OCCUPATION: Self employed - general contractor

EMPLOYER: Eckhorn Log Home Builders, Inc

- Do you reside within Wasilla City limits? Yes or No If so, for how long? 10 1/2 yrs
- 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? Eckhorn Log Home Builders, Inc - address same as above
- 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: NO
- 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 one-page resume to include education and experience that would enhance board membership.

Return completed application to the City Clerk.

- If applicable, please provide a brief statement describing your experience with Wasilla Municipal Code, land use regulations, and due process that would qualify you for this position. (Please use a separate sheet if necessary.)

I AM very familiar with the WMC.

I have previously served 4+ years on the Wasilla Planning Commission, as well as Wasilla City Council

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

I have read Sections 2.12.005 and 2.12.010 of the Wasilla Municipal Code defining financial interest and substantial financial interest and establishing the City's policy on Conflict of Interest. I agree to comply with the City's Conflict of Interest policy 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: 3-17-08

Date Received:
(date stamp below)

FOR OFFICE USE ONLY

Registered voter of the City: ___ yes ___ no

Date of Council Approval: _____ AM No.: _____

Date Applicant Notified: _____

Resume Attached: ___ yes ___ no

APOC Financial Disclosure Statement (check one):

Attached: _____

On File: _____

N/A: _____

Return completed application to the City Clerk.