



LOCAL RIVER MANAGEMENT ADVISORY COMMITTEE
NOMINEE FORM

Submit to Town of Hudson, 12 School Street, Hudson, NH 03051, or fax to 598-6481, or e-mail skaempf@hudsonnh.gov.

NOMINEE NAME: _____ DATE: _____

RIVER NAME: _____

REPRESENTING: MUNICIPALITY: _____ OTHER: _____

Nominee Contact Information:

Street Address: _____

Town: _____

Zip Code: _____

Email: _____

Phone (home): _____ Phone (cell): _____ Phone (work): _____

Is this a: [] New Appointment or a [] Reappointment

Please state your interest(s) in serving on the Local Advisory Committee:

- [] Local Government
[] Business
[] Conservation
[] Recreation
[] Agriculture
[] Riparian Landowners

(Form continued on page 2)

Board of Selectmen or Authorized Signature(s) – REQUIRED (e-signature acceptable)

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Note: By statute, the Commissioner of DES appoints the Local River Management Advisory Committee (LAC) members for each Designated River from nominees submitted by the local governing bodies through which the Designated River flows (RSA 483:8-a).

Please include a short description of your relevant background knowledge of local river-related issues or general river management and protection:

Most Local Advisory Committees engage in a variety of activities. Reviewing those activities listed below, please check those that are of most interest to you:

- Management Plan Preparation/Implementation
- Event Organization
- Public Education
- Grant Writing
- Public Relations
- Committee Administration
- Other _____

Most Local Advisory Committees meet monthly. In some cases they may meet more frequently to complete specific tasks, while in other cases your attendance may not required at all meetings. Please check one of the boxes below to indicate your availability to attend regularly scheduled meetings.

- I can attend monthly meetings on most weeknights
- I can attend monthly meetings only if scheduled on a specific weeknight
- I can only attend a limited number of monthly meetings
- I cannot attend monthly meetings, but am willing to complete tasks on behalf of the Local Advisory Committee

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| <p><u>For DES Office Use Only</u></p> <ol style="list-style-type: none">1. Nominee form has been reviewed by RMPP staff on (date) _____2. LAC Chair and Nominee have been contacted regarding nomination on (date) _____3. RMPP Staff recommends appointment to Commissioner: <input type="checkbox"/> Approve _____ RMPP staff _____ Date _____4. Appointment letter and information packet sent on (date) _____5. Contacts database updated (date) _____6. LAC Member List updated (date) _____ |
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