



DOWNTOWN DEVELOPMENT AUTHORITY BOARD APPLICATION

The Downtown Development Authority (DDA) is a body created under authority of P.A. 197 of 1975, as amended, for the purposes of preventing deterioration in business districts, to create and implement development plans, to issue bonds, and to utilize tax increment financing. The DDA's Board of Directors shall be appointed by the Mayor and City Council subject to approval by the Council Sub Committee on Boards, Commissions and Committees. Not less than a majority of the members shall be persons having an interest in property located in the district. The Board shall consist of the Chief Executive Officer of the City of St. Clair Shores (Mayor) and 8 members. At the creation of the Board, 8 initial members shall be appointed to one of the following terms: two members at 1-year terms, two at 2-year terms, two at 3-year terms or two at 4-year terms; and will serve four-year terms thereafter. Appointments to fill a vacancy shall be made by Mayor and Council.

DATE: _____

NAME: _____

ADDRESS: _____

CITY: _____ ZIP: _____

PHONE: _____ WORK PHONE: _____

EMAIL: _____

EMPLOYER: _____

EMPLOYER ADDRESS: _____

Are you currently a resident of the City of St. Clair Shores? Yes No

If yes, how long have you lived continuously in the City of St. Clair Shores? _____

Are you currently a registered voter of the City of St. Clair Shores? Yes No

Are you a property or business owner in the district: Yes No

If yes, please provide name and address of the business:

Name of Business: _____

Address of Business: _____

Property Owner Business Owner Both

Educational Background: _____

Community Activities and/or other experience: _____

Why are you interested in serving on the Downtown Development Authority Board of Directors?

Why do you feel you are qualified to serve on the Downtown Development Board of Directors?

List any other information you feel would be pertinent in your selection for the Downtown Development Board of Directors in this section (Feel free to attach your resume or list any relevant accomplishments)

References (Please list name and phone numbers): _____

Electronic Signature: _____

Date: _____

By checking this box, I agree that I am affixing my electronic signature to this application form. I Agree

Note: unless otherwise indicated, all information included on or attached to your application will become a matter of public record and will be viewable on the City of St. Clair Shores website as an information item attached to City Council agendas. Phone number, address and employer name and address are automatically redacted.

Thank you for your interest in servicing on the Downtown Development Authority Board of Directors. Please return this application to the City Clerk’s office at 27600 Jefferson, St. Clair Shores MI 48081 or via email to cityclerk@scsmi.net