Owens Valley Groundwater Authority (OVGA)

STATEMENT OF INTEREST - INTERESTED PARTY

Applicant
Name
(Agency(ies) or Entity(ies))

Interested Party Type
Interested Party Type
(See JPA Exhibit B for list of Interested Party Types)

Interested Party Director
Name
(First) (Last)

Int. Party Dir. Contact Info.
US Mail
(Street or POB) (City) (Zip Code)
E-mail
Phone

On separate pages attached to this application please provide the following information to the OVGA either via email to lpiper@inyocounty.us, mail at ICW, PO Box 337, Independence, CA, 93526 or in person at 135 S. Jackson St, Independence. Forms are due no later than February 28, 2019:

1. Identify any jurisdictional/operational areas of the Applicant within and/or adjacent to the Owens Valley Groundwater Basin.
2. Describe the Applicant’s specific interest(s) in the OVGA.
3. Describe any prior involvement by the Applicant entity(ies) in Owens Valley groundwater issues.
4. Explain how the Applicant is a suitable representative of the Interested Party Type that the Applicant desires to represent (see JPA Exhibit B).
5. Describe the Applicant’s governance structure.
6. Describe resources that the Applicant has available to contribute to the OVGA (in-kind, monetary, and/or relevant data).
7. Describe the Applicant’s Interested Party Director’s:
   i. Relevant educational background;
   ii. Relevant employment background;
   iii. Experience serving on any committee(s) or board(s);
   iv. Personal interest in serving as the Applicant’s Interested Party Director;
   v. Any business interests or positions that might conflict with his/her duties as the Applicant’s Interested Party Director;
   vi. Any additional information or qualifications related to the Applicant Director’s serving on the OVGA Board.

I hereby certify that I am authorized by the Applicant agency(ies) or entity(ies) to represent them as an Interested Party Director on the OVGA Board. I understand that this is a public document and by submitting this application my background and/or qualifications could become public knowledge, and that I will be required to publically disclose personal financial information that may be required to comply with conflict of interest law.

Signature:________________________________________ (Primary Director) Date:____________________
Signature:________________________________________ (Alternate Director) Date:____________________