

Application for Membership on DRPA/PATCO Citizens Advisory Committee

PLEASE TYPE OR WRITE LEGIBLY

Name:			
Home Address:			
City:		State:	Zip:
Email:			
Home Phone:		Work or Alternate Phone:	
If you are employed:			
Employer:			
Occupation:			
information. This is voluntary info still consider your application:	ormation. If you op	he diversity of the region, we would not to respond to the demograph	
Business, Ben Franklin Bridge Wa	alkway User, etc)	itizen, Disabled, Environmental, B	ridge Neighbor, PATCO Neighbor,
How often do you ride PATCO? □	 1 Daily □ Twice a	a Week □ Never □ Other:	
What PATCO station(s) do you no	rmally use?		
How often do you drive across th	e DRPA Bridges? [⊐ Daily □ Twice a Week □ Ne	ever 🗖 Other:
		Betsy Ross, Commodore Barry or V	

Summary Statement of Applicants Qualifications for Membership: Please explain why you want to serve on this committee, and what unique experience and skill-set you will bring to the committee. Please limit your response to three (3) typed pages, and feel free to attach a copy of your resume. Describe issues you believe this committee should address. Statement of Applicants Objectives/Goals if accepted for membership on the CAC: Applications are considered to be active for two years from date of signature. Completed applications should be submitted to the Authority at the address below by 5:00 pm on May 25, 2012. Customer Service can reached at 1-877-567-3772 (Option 5). **Attn: Customer Service & Community Relations** DRPA PO Box 1949 One Port Center, 2 Riverside Drive Camden, NJ 08101

PLEASE NOTE APPLICANTS MAY NOT BE DRPA OR PATCO EMPLOYEES OR MEMBERS OF THEIR IMMEDIATE FAMILY. APPLICANTS ALSO MAY NOT BE RELATED TO MEMBERS OF THE BOARD, OFFICERS, OR COUNSEL TO THE BOARD. CONTRACTOR OR VENDORS OF THE DRPA/PATCO MAY CONSTITUTE A CONFLICT OF INTEREST, AND WILL THEREFORE NOT BE ELIGIBLE FOR MEMBERSHIP ON THE COMMITTEE.

Date

Signature