

SNOHOMISH COUNTY BOARDS & COMMISSIONS APPLICATION FORM
INITIATOR: Please fill in this section
County department/agency:
Contact person/phone:
Name of Board/Commission:
Advisory Governing Ad Hoc Ongoing
Term of Appointment Commencing
Mandated Requirements for Appointment*
SNOHOMISH COUNTY BOARDS & COMMISSIONS APPLICATION FORM
NOMINEE: Please fill in this section
Name of Board/Commission: Board of Equalization
New appointment: Reappointment: 1 st 2 nd v Ex-Officio
Snohomish County Council District (Please choose one):
1 3 4 5 Don't Know
Name: Dennis Carlin
Home Address: 1052 Goat Trail Loop Rd.
City: MukiHeo State: WA Zip: 98275
Mailing Address (if different):
E-mail: dcarlin1965@gmail.com
Current Employer: retired Army
Occupation:
Education: BA European History
Licenses held (if applicable):
Why would you like to serve on this board/commission? I know the
county properties pretty well having been a
commercial lenger in a local bank.



Please explain why you are a qualified candidate, including relevant professional experience, to
serve on the board/commission. Served on the board
as Chairman
Please list community involvement/volunteer activities.
How did you learn of this opportunity? was asked by board
Do you currently serve on a Snohomish County board or commission?*
*2.03.060SCC - Candidates for appointment to County boards or commission must meet the
following requirements:
1. Possess qualifications for the appointment sought, as shown by the candidate's written
documentation and any hearing testimony.
2. If a reappointment, demonstrate the continuing benefits of retaining the board member
as discussed in the executive's recommendation and a satisfactory attendance record,
as determined by adopted criteria of the particular board. 3. Reside or work in Snohomish County or show evidence of special interest in Snohomish
County, provided that a candidate may not be a County employee.
4. Membership is limited to one position at a time on a board or commission, provided
that a member of a board may simultaneously serve on one ad hoc or advisory
committee. (Ord. 82-037 § 1, adopted June 9, 1982)
By signing this Application Form, Nominee acknowledges that he/she will comply with all
county policies, county code, and state law. Nominee also acknowledges that any record,
including personal e-mail, prepared, owned, used, or retained by Nominee in the conduct of
Board/Commission business is a public record, and Nominee agrees to produce said records
to County upon request. Failure to comply with the above provisions may result in Nominee's
removal from Board/Commission.
Signature:
Date: $9/1/z^2$
Please attach resume if available and return to:

Dave Somers, County Executive Snohomish County Executive Office 3000 Rockefeller Ave., MS 407

Everett, WA 98201-4046

(425) 388-3699 phone (425) 388-3434 fax county.executive@snoco.org