



SNOHOMISH COUNTY BOARDS & COMMISSIONS NOMINATION FORM

INITIATOR: Please fill in this section

County department/agency: Public Works Department / Solid Waste Division

Contact person/phone: Jo-Anne Antoun / 425-388-6489

Name of Board/Commission: Solid Waste Advisory Committee

Advisory Ongoing

Term of Appointment 2 years Commencing from Date of Appointment

Mandated Requirements for Appointment* Must meet criteria outlined in SCC 7.34

SNOHOMISH COUNTY BOARDS & COMMISSIONS APPLICATION FORM

NOMINEE: Please fill in this section

Name of Board/Commission: Solid Waste Advisory Committee

New appointment: _____ Reappointment: 1st _____ 2nd _____ Ex-Officio _____

Snohomish County Council District (Please choose one):

1 2 3 4 5 Don't Know

Name: Brent Kirk

Home Address: _____

City: Granite Falls State: WA Zip: 98252

Mailing Address (if different): PO Box 1440, Granite Falls WA 98252

Telephone (Home): 360-691-6441 (Cell) 425-583-1000

E-mail: brent.kirk@ci.granite-falls.wa.us

Current Employer: City of Granite Falls

Occupation: City Manager/Public Works Director

Education: BA – Philosophy WSU

Licenses held (if applicable): _____

Why would you like to serve on this board/commission? Requested for reappointment



Please explain why you are a qualified candidate, including relevant professional experience, to serve on the board/commission. 20 years in Local Govt Management experience as Public Works Director, Stormwater Manager, City Administrator, City Manager, LS Sewer District Commissioner

Please list community involvement/volunteer activities. Lions Club, Elks Club, Chamber of Commerce, oversight of all Granite Falls Community Activities.


How did you learn of this opportunity? Sno County Staff

Do you currently serve on a Snohomish County board or commission? * Yes – SWAC

***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.

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: 7/24/20

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