CITY OF PENDERGRASS

DOWNTOWN DEVELOPMENT AUTHORITY

BOARD MEMBER APPLICATION

Application deadline: Friday, August 7, 2026, at 5:00 p.m.

Submit to City Hall or email mayor.ellis@cityofpendergrass.net | Questions: 706-693-2494

APPLICANT INFORMATION

Full Name: _____

Home Address: _____

City/State/ZIP: _____

Phone: _____ **Email:** _____

ELIGIBILITY

To be eligible, an applicant must meet at least one of the following. Check all that apply:

☐ I reside within the City of Pendergrass.

☐ I own a business located within the City of Pendergrass.

☐ I own property located within the City of Pendergrass.

If qualifying through business or property ownership, provide the business name or property address:

_____

BACKGROUND AND INTEREST

Current Occupation/Employer (if applicable): _____

1. Why are you interested in serving on the Downtown Development Authority?

2. Describe any experience, skills, community involvement, or knowledge that would help you serve effectively.

COMMUNITY PRIORITIES

3. What ideas or priorities would you like the DDA to consider for downtown Pendergrass?

SERVICE AND AVAILABILITY

DDA members may help guide downtown planning and revitalization, encourage business development, support downtown projects and events, and work with City officials and community partners.

Are you willing and able to attend regular meetings? ☐ **Yes** ☐ **No**

Are you willing to review meeting materials and participate in DDA projects? ☐ **Yes** ☐ **No**

Have you previously served on a board, authority, committee, or civic organization? ☐ **Yes** ☐ **No**

If yes, please identify the organization(s) and dates of service:

_____

DISCLOSURE

Do you have any financial, business, family, or other interests that could create an actual or potential conflict of interest while serving on the DDA? ☐ **Yes** ☐ **No**

If yes, please explain:

CERTIFICATION AND SIGNATURE

I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that service on the Downtown Development Authority is an appointed position and that submitting this application does not guarantee appointment. If appointed, I agree to carry out the duties of the position in good faith, comply with applicable ethics and conflict-of-interest requirements, and complete any required training.

Applicant Signature: _____ **Date:** _____

Printed Name: _____

FOR CITY USE ONLY

Date Received: _____ **Received By:** _____

Eligibility Verified: ☐ **Yes** ☐ **No** **Appointment Date:** _____