



## Application for Code Advisory Committee Appointment

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### Section 1 – Applicant Information (Type or Print)

Name: \_\_\_\_\_ Telephone Number(s): (\_\_\_\_) \_\_\_\_\_

Residence / Business Address: \_\_\_\_\_  
Number and Street City State Zip Code

Mailing Address (if different): \_\_\_\_\_  
Number and Street City State Zip Code

E-mail Address: \_\_\_\_\_

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### Section 2 – Selection of Code Advisory Committee / Position

Instructions:

Select the Code Advisory Committee for which you are applying to serve. Designate by entering a number (e.g. #1 or #2) within the box as to your priority selection. Should the Commission not select you for appointment to your #1 priority choice, you will be considered for appointment to another committee based upon your priority selection.

**(A) Code Advisory Committee:** (Enter your priority selection (e.g. #1, #2) in each box.)

Building, Fire & Other

Health Facilities

**(B) Position:** This position is for the **Local Government Building Official** only.

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### Section 3 – Please submit the following information with this completed application:

- Resume identifying the applicant and detailing the discipline(s) and knowledge criteria for the position for which the applicant is applying.
- Letter(s) of recommendation if so desired.

The completed application, resume and letter(s) of recommendation may be mailed to the address listed above or e-mailed to the CBSC at [cbsc@dgs.ca.gov](mailto:cbsc@dgs.ca.gov) .

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_