



## TOWN OF PEGRAM APPLICATION FOR PLANNING COMMISSION

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_  
Home Work Cell

Occupation: \_\_\_\_\_

Qualifications and Skills:

Why would you like to be considered?

TO BE READ AND SIGNED BY APPLICANT: I realize that this is a non-paying position appointed by the Mayor of Pegram. Meetings are called by the Chairman of the Board, and monthly scheduled Planning Commission meetings are held on the second Monday of each month at Pegram Town Hall. With my signature, I testify that I have all the qualifications named in the Town Charter as required of a member of the Planning Commission; that I will support the Constitutions of the United States of America and of the State of Tennessee, and the Charter and Ordinances of the Town of Pegram, Tennessee; and if appointed, I will faithfully discharge the duties of my position.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

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