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| New Hampshire Department of Environmental Services logo | **LOCAL RIVER MANAGEMENT ADVISORY COMMITTEE**  **NOMINEE FORM** | State Seal of New Hampshire |
| New Hampshire Rivers Management and Protection Program | | |

RSA 483:8-a

Please complete both sides of this form and email to [riversprogram@des.nh.gov](mailto:riversprogram@des.nh.gov). Please type “NOMINEE FORM” and nominee’s name in the subject line. Forms can also be sent by mail to: Rivers Coordinator, NHDES, 29 Hazen Drive, P.O. Box 95, Concord, NH 03302-0095. For questions, please contact the Rivers Coordinator at 271-2959.

**Nominee Information**

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| Nominee Name: | | Date: |
| Street Address: | | |
| Town: | | ZIP Code: |
| Phone (home): | Phone (cell): | Phone (work): |
| Email: | | |

**Nomination Information**

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| Type of Appointment - | New Appointment | Reappointment |
| River Name: | | |
| Type of Representation - | Municipality: | Other: |
| Please state your interest(s) in serving on the Local River Management Advisory Committee: | | |
| Local Government  Business | Conservation  Recreation | Agriculture  Riparian Landowners |
| Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

**Board of Selectmen or Authorized Signature(s) – REQUIRED (e-signature acceptable)**

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| --- | --- |
| Name: | Title: |
| Name: | Title: |
| Name: | Title: |
| Note: By statute, the New Hampshire Rivers Management Advisory Committee appoints the Local River Management Advisory Committee (LAC) members for each Designated River from nominees submitted by the local governing bodies through which the Designated River flows (RSA 483:8-a). | |

**Additional Information**

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| Please include a short description of your relevant background knowledge of local river-related issues or general river management and protection:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Most Local Advisory Committees engage in a variety of activities. Reviewing those activities listed below, please check those that are of most interest to you: | | |
| Grant Writing  Event Organization | Public Education  Public Relations | Committee Administration  Management Plan Preparation/Implementation |
| Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Most Local Advisory Committees meet monthly. In some cases, they may meet more frequently to complete specific tasks, while in other cases your attendance may not be required at all meetings. Please check one of the boxes below to indicate your availability to attend regularly scheduled meetings:  I can attend monthly meetings on most weeknights.  I can attend monthly meetings only if scheduled on a specific weeknight.  I can only attend a limited number of monthly meetings.  I cannot attend monthly meetings, but am willing to complete tasks on behalf of the Committee. | | |

**For NHDES Office Use Only**

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| LAC Member List and Contacts Database updated (date): | | |
| LAC Chair and Nominee have been contacted regarding nomination on (date): | | |
| RMPP Staff recommends appointment to the Rivers Management Advisory Committee - | | |
| Approve | RMPP staff: | Date: |
| Appointment confirmation sent to municipality and LAC Chair on (date): | | |
| Appointment letter and information packet sent on (date): | | |