



Department of Public Safety
STATE FIRE MARSHAL'S OFFICE

52 STATE HOUSE STATION

AUGUSTA, ME 04333-0052

TEL.: (207) 626-3880

FAX: (207) 287-6251



APPLICATION FOR MUBEC TECHNICAL ADVISORY GROUP APPOINTMENT

Please feel free to attach a sheet if not enough space is provided for your answers. A résumé is also required that includes complete education, employment and professional history. Please return this form and résumé to the address listed above.

Name: _____

Town of Residence: _____ Year Round Resident? Yes No

Occupation: _____

Home Mailing Address: _____

Business Address: _____

Phone: _____ E-Mail: _____

Check name(s) of Technical Advisory Group you are interested in serving on: (please **prioritize** if more than one choice as to which ones you want to be on.)

- | | |
|---|--|
| <input type="checkbox"/> Residential | <input type="checkbox"/> Building Code |
| <input type="checkbox"/> Mechanical & Ventilation | <input type="checkbox"/> Fire & Life Safety Code – Accessibility |
| <input type="checkbox"/> Training & Certification Committee | <input type="checkbox"/> Energy |
| <input type="checkbox"/> Historic/Existing Building Code | <input type="checkbox"/> Sprinklers |

Where are you currently employed? _____

Have you ever been elected or appointed to public office (including boards/commissions) in Maine?

Yes No If yes, please list and include dates:

Please list association memberships:

Have you been or are you now a registered lobbyist? Yes No

Have you held or do you hold an occupational or professional license or certificate in the State of Maine or any other state? Yes No

If yes, please specify the type of license/certificate and the issuing authority:

Can you: Attend daytime meetings? Yes No

Spend time reading materials in preparation for meetings? Yes No

Please provide information on your background, experiences, or expertise that you feel would benefit the TAG on which you wish to serve?

Please list three persons unrelated to you who would support your appointment:

<u>Name</u>	<u>Occupation</u>	<u>Address</u>	<u>Phone</u>
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I hereby certify that the information provided in this application is true, correct and complete to the best of my knowledge.

Signature

Date