

GREEN VALLEY MUTUAL WATER COMPANY

P.O. BOX 8300 GREEN VALLEY LAKE, CALIFORNIA 92341 TELEPHONE: (909) 867-2912

FAX: (909) 867-9603

BOARD OF DIRECTORS APPLICATION FORM

Thank you for your interest in serving as a member of the Board of Directors of the Green Valley Mutual Water Company. Completing this form will help you understand the skills and time/resource commitments of this position.

BOARD MEMBER QUALIFICATIONS & RESPONSIBILITIES:

QUALIFICATIONS: A Director must own and control stock in the Green Valley Mutual Water Company and must:

- 1. Not be a commissioner or officer of any of the following:
 - a) A County Service Area serving Green Valley Lake
 - b) Running Springs Water District
 - c) Rim of the World Recreation and Park District
 - d) Green Valley Lake Fire Department
 - e) San Bernardino County Flood Control District
 - f) San Bernardino County Transportation Department
 - g) Any other governmental agency having or providing direct services and/or regulations to Green Valley Lake.
- 2. Not be a lessee or employee of a lessee of Company-owned facilities (GVL Recreation).
- 3. Not be an employee of Green Valley Mutual Water Company.
- **4.** Not be a person who is currently serving a full three (3) year term as a Director and shall not be eligible for election or appointment to another term the first year of which commences immediately following the expiration of his prior term.
- 5. Be one who has attained the legal age of majority.
- **6.** Be certified in California AB 54 within four (4) months of election or appointment to the Board of Directors.

RESPONSIBILITIES:

- 1. A Director must serve a three-year term on the Board. The election is held at the Annual Shareholder Meeting scheduled for May each year.
- 2. A Director must attend regular Board of Directors meetings held once a month (normally held on the third Monday of the month).
- 3. A Director must serve and participate on elected Board Committees.
- **4.** This position is volunteer; board members receive no compensation for their service.



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SHAREHOLDER INFORMATION: NAME: GVL PROPERTY ADDRESS: TYPE OF WORK OR IF RETIRED: BRIEFLY DESCRIBE WHY YOU WOULD LIKE TO JOIN OUR BOARD OF DIRECTORS: **CONTACT INFORMATION:** MAILING ADDRESS: _____ HOME PHONE: ______ WORK PHONE: CELL PHONE: GVL PHONE: EMAIL ADDRESS: Where is your primary residence? ____ Where are you registered to vote? I certify that the information in this application is true and correct to the best of my knowledge. Signature Date

Please return the completed application to: Green Valley Mutual Water Company, P.O. Box 8300

Green Valley Lake, CA 92341

or email to office@gvmwc.org

Thank you for your application. A member of the Nominating Committee will contact you.