



**APPLICATION FOR  
APPOINTMENT TO COUNTY OF LAKE  
ADVISORY BOARD, COMMISSION OR COMMITTEE**

**RECEIVED****APR 27 2018****COUNTY OF LAKE  
BOARD OF SUPERVISORS**Name of Applicant: Keith AhartHome Address: 3141 Keeling AveCity: LakeportZIP: 95453Mailing Address: Same as above

City: \_\_\_\_\_

ZIP: \_\_\_\_\_

Occupation: Water System SuperintendentEmail: kahart@gswater.comHome Phone: (707) 489-8290Work Phone: (707) 994-9118

Supervisory District \_\_\_\_\_

W-2, H-4

Name of Board/Committee/Commission(s) you are interested in serving on: \_\_\_\_\_

Board/Committee/Commission category under which you are applying, if applicable:

Blue Ribbon Committee of the Rehabilitation of Clear Lake

List past or present County appointments, as well as any other public service appointments, or elected positions held (please list dates served):

No County appointments or Elected Positions

Please briefly explain why you would like to serve, what special qualifications or expertise you may have for the position and any other information you would like to include as part of your application:

The health of Clear Lake has many ecological and economical benefits. As a local water system operations veteran and supervisor I have been interested in the health of Clear Lake for nearly 30 years. In that time I have been involved in several projects that identify what conditions exist that impact the lake water quality are. I would like to now lend my knowledge and expertise to help put into place remediation measures to address those impacts.

List community organizations to which you belong:

Rotary Club of Clearlake (President 2018-19), Lake County Water Purveyors Emergency Response Working Group

Convictions and Penalties – Have you ever been convicted of a felony? If yes, give date(s), location(s) and penalties. (Convictions are evaluated for each position and are not necessarily disqualifying.)

None

List any affiliation you or your spouse has with public service agencies:

13 year volunteer firefighter - Lake County Fire Protection District (Retired 2015)

I certify that the above information is true and correct, and I have read the Lake County Advisory Board, Committee and Commission Conflict of Interest Policy. I agree to abide by that policy and to the best of my knowledge, I have no conflict of interest.

  
 (Signature)

4/27/18  
 (Date)

PLEASE RETURN COMPLETED FORM TO:

Clerk of the Board of Supervisors  
255 N. Forbes St.  
Lakeport, CA 95453  
FAX (707) 263-2207

For Board Use Only:

APPOINTED YES \_\_\_ NO \_\_\_

APPOINTED ON: \_\_\_\_\_

TERM EXPIRES: \_\_\_\_\_