Safe and Affordable Funding for Equity and Resilience (SAFER) Advisory Group Application

The State Water Board is seeking qualified applicants for the SAFER Advisory Group. Applications are due by September 23, 2022.

- Emailed applications are recommended and should be sent to SAFER@waterboards.ca.gov by 11:59 p.m.
- Mailed applications must be postmarked by September 9, 2022, and sent to Attention: SAFER Advisory Group Applications, Office of Public Participation, State Water Resources Control Board, 1001 I Street, Sacramento, CA 95814.

Applicant information:

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<td>Phone</td>
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Select the category for which you are applying:

- ☐ Public Water Systems (PWS)
  - Name of System
  - Your Title

- ☐ Technical Assistance Providers (TA)
  - Name of Provider
  - Your Title

- ☐ Local agencies (Local)
  - Name of Agency
  - Your Title

- ☐ Nongovernmental Organizations (NGO)
  - Name of Organization
  - Your Title
Tribal Representative (select which applies):
☐ Tribal Government  ☐ Member of a Tribe  ☐ Tribal Water System  ☐ Tribal NGO
☐ Other  Explain Other:  

Name of Tribe  
Your Title/Role

Residents served by community water systems in disadvantaged communities, state small water systems, and domestic wells (Resident)

To which community do you belong?  

How long have you lived in the community?  

From which of the following do you receive your water?

Explain other:  

The Public

Select the other categories for which you qualify:
☐ Public Water System (PWS)  ☐ Technical Assistance (TA)  ☐ Local
☐ Non-Governmental Organization (NGO)  ☐ Resident

List organizations/individuals who support your application:

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Explain why you are interested in joining the SAFER Advisory Group: (500-character max)

(Continue to page 3)

What perspective can you bring to the SAFER Advisory Group? Are there any ideas or suggestions for the SAFER Program you would like to share? (500-character max)

☒ I have read the SAFER Advisory Group Charter and understand the roles, responsibilities, and conflict of interest provisions associated with an appointment to the SAFER Advisory Group.

Applicant Signature_________________________ Date_________________________