



APPLICATION FOR CITY BOARDS AND COMMISSIONS

Return to:
 City Administration Office
 420 N. Pokegama Avenue
 Grand Rapids, MN 55744
 218-326-7600

Personal Information:

Name: William Martinetto	Date: 2/21/2023
Address: [REDACTED]	Phone: [REDACTED]
Employer: Rapids Brewing Company	Evening Phone: [REDACTED]
Occupation: Owner/GM	E-Mail: [REDACTED]

Please rank in order the Boards/Commissions on which you would like to serve (leave blank any on which you do not wish to serve):

<input type="checkbox"/> Arts & Culture Commission <input checked="" type="checkbox"/> Economic Development Authority <input type="checkbox"/> Golf Course Board <input type="checkbox"/> Human Rights Commission <input type="checkbox"/> Library Board	Parks, Recreation & Civic Center Board Planning Commission Police Community Advisory Board Public Utilities Commission	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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Do you have special qualifications that you feel would help you be particularly effective on a City Board or Commission? (i.e. work experience, volunteer experience, education, hobbies, etc?) Starting and operating a business in downtown Grand Rapids, undergrad education in finance, accounting and economics, an MBA, and a strong desire to see GR grow and redevelop.

How did you become interested in serving on a Board or Commission?

My interest stems from my desire to help in the development and redevelopment of the GR area in any way that I can. Starting and operating a business in GR was a great catalyst for this desire.

Are you related to any City employee or elected official? YES ☒ NO ☐

If yes, to whom and how are you related? Paul Martinetto - Brother

Are you a Resident ☒ or Non-Resident ☐ ?

Do you own property or own a business within the Grand Rapids city limits?

YES ☒ NO ☐ If yes, please explain: Rapids Brewing Company

Data Authorization:

If appointed, I, William Martinetto, authorize the City of Grand Rapids to release the following private data upon request made to the City (check all that apply).

Home Phone # _____

Work Phone# _____

Cell Phone # 616-888-8884

I also authorize the City of Grand Rapids to release such authorized private data referenced above to members of the general public, City staff, Mayor and City Council members upon request for such data. The person(s) receiving such private data must use it only for lawful purposes.

This authorization shall be modified or cancelled only upon written notice to the City Clerk, City of Grand Rapids.

I agree to inform the City Clerk's office of any change indicated above.

I agree to relinquish and waive all claims that may arise against the City, its agents or employees for releasing any and all authorized data referenced above relating to this agreement.

I recognize and agree that I will be issued a City of Grand Rapids official email and will utilize it for official business of Boards & Commissions only.

2/21/20
Date


Signature