



**CITY OF NEEDLES**

City Clerk's Office  
817 Third Street  
Needles, Ca 92363  
cclark@cityofneedles.com

**BOARD / COMMISSION AND/OR COMMITTEE APPLICATION**

Applicant Name: MICHAEL WRIGHT

Address: [REDACTED]

Daytime Phone Number: \_\_\_\_\_ Cell [REDACTED]

Home Phone Number: \_\_\_\_\_ Email [REDACTED]

Position(s) applied for: PLANNING COMMISSION

Special comments and/or interests: I WOULD LIKE TO CONTINUE SERVING IN THIS POSITION. IT'S MY ON-GOING GOAL TO MAKE A POSITIVE CONTRIBUTION TO THE CITY OF NEEDLES.

Background and Qualifications: CURRENTLY SERVING AS CHAIRMAN ON THE PLANNING COMMISSION. I HAVE ALSO SERVED FOUR YEARS ON NPIUA.

You must be a registered voter in the City of Needles to qualify for appointment.

Signature Michael D. Wright Date 10/13/25  
(Please return to the above address)