

Honolulu District

## **Community Interest Application Form**



## **Restoration Advisory Board**

November 2010

## Community Interest Application Form for Waikane Training Area Restoration Advisory Board

## Conditions for Membership:

Restoration Advisory Board (RAB) members are volunteering to serve until the remedial/removal response actions are complete and attend all RAB meetings. Duties and responsibilities will include reviewing and commenting on technical documents and activities associated with the Defense Environmental Restoration Program/Formerly Used Defense Site at the former Waikane Training Area. Technical experts will be made available to the RAB. Membership will be available to community members and groups, regulatory agencies, property owners and stakeholders to facilitate the exchange of information and/or concerns between the community and the RAB. RAB members will develop a mission statement and operating procedures. Community members on the RAB can expect to devote approximately 20 hours per year to support the RAB. RAB members will receive no compensation for their service.

Priority for RAB membership will be given to local residents that are impacted/affected by the former Waikane Training Area. Completed Application Form must be received by Friday, December 4, 2010. Mail Form to:

Clayton Sugimoto	or	Walter Nagai	
c/o Wil Chee - Planning, Inc.		U.S. Army Corps of Engineers, Honolulu Distric	
1400 Rycroft Street, Suite 928		Building 252, Attention: CEPOH-PP-E	
Honolulu, Hawaii 96814		Fort Shafter, Hawaii 96858-5440	
Phone: 808-955-6088		Phone: 808-438-1232	
Fax: 808-942-1851		Fax: 808-438-6930	
E-mail: wcp@lava.net		E-mail: walter.t.nagai@usace.army.mil	
Name:			
Address.			
Address:Street Apt #/City/State/Zip			
sacot rape in exty, state, sap			
<b>E-mail</b> (if available):			
Phone: ()	(	) ( )	
Daytime	\	Home Fax	

1.	Are you affiliated with any group related to environmental restoration activities? If yes, list the group and your position, if applicable.
2.	Briefly state why you would like to participate on the RAB.
3.	What has been your experience working as a member of a diverse group with common goals?
4.	The community co-chairperson will be selected by community members of the RAB. Please indicate if you are interested in being considered for the community co-chairperson position on the RAB.
	Yes, I would like to be considered.
5.	Are you willing to voluntarily serve on the RAB?
	Yes, I am willing to serve.
6.	By submitting this form, you are indicating that you are aware of the time commitment that this appointment will require of you.
	PRIVACY ACT NOTICE
	<b>thority:</b> 10 U.S. Code (USC) 2705(c) and 42 USC 9620(f), State and local participation in anup of federal facilities.
	<b>ncipal Purpose:</b> To identify members of the local community who are interested in participation he RAB.
wh	<b>utine Uses</b> : The requested information will be used to develop a list of interested persons from ich the community members of the RAB will be selected. The information will also be used by Army to contact the individuals who are selected.
	<b>sclosure</b> : Disclosure of the requested information is voluntary. Failure to provide all the uested information may prevent selection to the RAB.
App	licant Signature Date