

April 3, 1995

Introduced By: RON SIMS

cwac6:sdw

Proposed No.: 95-026

MOTION NO. **9576**

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A MOTION confirming the Executive's
reappointment of Rowland Martin to the
Citizens Water Quality Advisory
Committee.

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NOW, THEREFORE BE IT MOVED by the Council of King
County: The county executive's reappointment of Rowland
Martin to the Citizens Water Quality Advisory Committee, term
to expire on June 30, 1996, is hereby confirmed.

PASSED by a vote of 13 to 0 this 22nd day of
May, 1995.

KING COUNTY COUNCIL
KING COUNTY, WASHINGTON

Kent Pullen
Chair

ATTEST:

Jane Masno
Deputy Clerk of the Council

Attachments: Application
Financial Disclosure Statement

CWQAC

Membership Application **9576**

Citizens' Water Quality Advisory Committee

Committee members may not be Metro or King County employees.

Please type or print with a black pen.

Name	<u>Richard Martin</u>		
Home Address	<u>661 Taylor Ave NW</u>		
City	<u>Renton</u>	State	<u>WA</u> ZIP <u>98055</u>
Neighborhood	<u>87th NW</u>		
Telephone (home)	<u>772-6220</u>	(work)	<u>773-2015</u>
King County Council District	<u>5</u>		

(See your voter registration card or call King County Records and Elections at 296-1565. You must live within King County to be a committee member.)

Mailing address, if different from above _____

Occupation (present/former, if retired) Chemical Engineer

Employer Boeing

Have you ever served on a Metro citizens' advisory committee? Yes No

If yes, which committee and when? CWQAC

How did you learn about Metro committee membership? _____

(over)

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Committee members do not serve as direct representatives of community groups, and selection is not dependent upon membership in such groups. However, ties with such organizations can further the communication process between citizens and Metro. Please list the groups with which you are affiliated (volunteer, professional, community organizations):

Voluntary Information

Metro seeks a broad representation of backgrounds and interests on its citizens' advisory committees. The information you volunteer here, which will remain confidential, will assist council members in meeting this goal.

Race American Indian/Alaska Native African American/Black Hispanic/Latino
 Asian/Pacific Islander White Other

Sex Male Female

Age 20-30 31-40 41-50 51-64 65 and over

Disability Yes No If yes, list disability _____



Will you commit to spending 6-12 hours a month on committee activities, including attending at least two meetings a month? Yes No

Applicant's Signature Rowland Martin Date 10/19/94

Please return this application, with supplemental questionnaire to:
WPCD Communications
King County Department of Metropolitan Services
821 Second Ave., M.S. 95
Seattle, WA 98104-1598

Application deadline for the 1995-96 term is October 14, 1994. For more information, call 684-1464.

Notification of appointments will be sent to all applicants in January.

Supplemental Questionnaire

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This questionnaire is intended to assist Metro in selecting advisory committee members. Please return this with your application.

Name Rowland Martin

Please type or print with a black pen.

- Briefly describe what water quality issues in King County are of concern and importance to you.

Access to and use of ^{ocean} lakes, rivers
and streams for all types of water-
related recreation.
Quality of surface water.

- Why do you wish to be a member of CWQAC? Please share any additional information about your interest and/or experience with these issues.

I am interested in assuring that
wastewater treatment policies and
regulations achieve reasonable goals
in a cost-effective manner. I am
involved in projects that discharge
treated wastewater into the sewer system
I have worked on various projects
to conserve and reuse water and
minimize waste water.

(over)

• After reading the enclosed CWQAC fact sheet, please indicate below one or two subcommittees in which you would become involved should you be selected as a CWQAC member.

- Biosolids Management Oversight
- Budget Oversight
- Facilities Planning
- Industrial and Hazardous Waste Management
- Public Outreach
- Water Reuse and Reclamation
- Watershed Management
- Other

• Why did you choose the subcommittee(s) checked?

*I feel I have technical background
 in the topic. I am interested
 in the economic feasibility of
 this resource.*

Thank you for your interest.





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King County Board of Ethics
King County Administration Building
500 Fourth Avenue Room 553
Seattle, Washington 98104
206-296-1586

**KING COUNTY
FINANCIAL DISCLOSURE STATEMENT**

All Board and Commission Members

In accordance with Section 3.04.050 of the King County Code, all King County board and commission members are required to complete a financial disclosure statement within ten (10) days of appointment and by April 15 of each year.

For reporting purposes, "immediate family" includes spouse, dependent children, and other dependent relatives residing in the employee's household. "Person" designates any individual, partnership, association, corporation, firm, institution, or other entity, whether or not operated for profit.

Type or print all information and sign this form on page three.
Use additional sheets if necessary.

Return to the Director, Community Relations
King County Executive Office
400 King County Courthouse
516 Third Avenue
Seattle, WA 98104

DATE: 12/30/94

NAME: R J Martin

ADDRESS: 661 Taylor Renton 98055

BOARD OR COMMISSION: CWQAC

A. List all sources of income over \$1500.00 (include salary, retirement, and dividend income):

Source of Income	Type of Business	Address
Salary	Aerospace	Seattle, WA 7755 E. Marginal Way



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B. Do you have a direct financial interest in any mutual fund or other "person" or enterprise in excess of \$1500.00 (insurance issued either to yourself or your spouse, accounts in banks, savings and loan associations or credit unions are not considered financial interest; however, municipal bonds, trusts, and stocks and all other types of financial interest are included)?

YES

NO

If you answered yes, please list:

Mutual Fund or Enterprise	Type of Business	Address

C. List any office, directorship, or trusteeship in any "person" or other governmental entity which does business in King County and which is held by you or members of your immediate family:

Name/Relationship	Type of Business	Position Held

D. List by legal description or popular address all real property owned by you or a member of your immediate family in King County. Include options to buy if the property is valued in excess of \$1500.00.

Address	Name of Owner	Relationship to Employee
661 Taylor, Renton	self	self

E. List all real property located in King County and divested by you or a member of your immediate family during the reporting year and valued in excess of \$1500.00:

Address	Name of Owner	Amount Divested

F. This section is only to be completed by attorneys who practiced before state and local regulatory agencies within the preceding twelve-month period:

1. List the name of the "person of which you are a member, partner, or employee:

2. List the name(s) of the agencies that you practice before:

3. List the amount of gross compensation in excess of \$1500.00 received by the "person" and attorney respectively as a result of your practice before such agencies in the past twelve months:

ATTESTATION

I, RJ Martin, certify under penalty of perjury that this statement is true, accurate, and complete.

R Martin
Signature

Signed this 30th day of December, 1994.