

Town of Winfield | 10645 Randolph Street, Suite A | Winfield, IN 46307 Phone: (219) 662-2665 Fax: (219) 663-2431

Plan Commission Application

Date:			
Name:			
Address:			
Contact Number:		Time to call:	
Email Address:			
Political Party Affiliation:	Republican	Democrat	None
The Plan Commission meets that there are Agenda items.	s every second and f	fourth Thursday of th	e month, provided
Can you devote two (2) ever	nings a month to th	is appointment?	
Can you serve a four (4) year	r term?		
Briefly, explain why you fer requirements for appointme			