



County of Santa Cruz

BOARD OF SUPERVISORS

701 OCEAN STREET, SUITE 500, SANTA CRUZ, CA 95060-4069

(831) 454-2200 FAX: (831) 454-3262 TDD: (831) 454-2123

JANET K. BEAUTZ
FIRST DISTRICT

WALTER J. SYMONS
SECOND DISTRICT

MARDI WORMHOUDT
THIRD DISTRICT

TONY CAMPOS
FOURTH DISTRICT

JEFF ALMQUIST
FIFTH DISTRICT

AGENDA: 5/18/99

May 12, 1999

BOARD OF SUPERVISORS
County of Santa Cruz
701 Ocean Street
Santa Cruz, CA 95060

RE: APPOINTMENT TO DISASTER COUNCIL

Dear Members of the Board:

I recommend the appointment of the following person to the Disaster Council in accordance with County Code Chapter 2.106, Section 30, for a term to expire April 1, 2003:

Carl Johnson
436 East Beach Street
Watsonville, CA 95076
728-2137 (H)
763-4111 (B)

Sincerely yours,

TONY CAMPOS, Supervisor
Fourth District

TC:ted

cc: Carl Johnson
Disaster Council

1469A4

APPLICATION FOR APPOINTMENT TO A COUNTY ADVISORY BODY

INSTRUCTIONS

If you are interested in serving on a County Advisory Body please complete the following application and return it to the Board of Supervisors, 701 Ocean St., Room 500, Santa Cruz, California. If you are interested in being considered for more than one advisory body a separate application should be submitted for each appointment you are seeking.

Upon receipt, your application for appointment will be routed to each Board member and then filed for further consideration by Board members when there is a vacancy on the advisory body. If a Supervisor is interested in nominating you for appointment, the Supervisor will contact you and discuss the appointment, the appointment-process, and requirements for the advisory body in question.

Please specify below the Commission/Committee or Board to which you are seeking appointment and provide the requested information.

Thank you for your interest in County Government.

COMMISSION, COMMITTEE or BOARD SANTA CRUZ County Disaster Council
FOURTH DISTRICT

N a m e CARL Johnson

Address 436 EAST BEACH ST.
Watsonville, CA. 95076

Phone (Home) 831. 728. 2137

(Business) 831, 763, 4111

Supervisory District 4

Length of Residence in Area 45 yrs.

Age (Optional) Circle one: Under 21
21-30
31-40
Over 40

PREVIOUS COMMISSION OR COMMITTEE SERVED (Please specify)

<u>Advisory Body</u>	<u>Term</u>
<u>None</u>	

EDUCATION

<u>Institution</u>	<u>Major</u>	<u>Degree</u>	<u>Year</u>
Watsonville High	General		
Cabrillo	Computeres		
HARTMELL	Water Science		

WORK/VOLUNTEER EXPERIENCE

<u>Organization</u>	<u>Address</u>	<u>Position</u>	<u>Year</u>
City of Watsonville Public Works + Utilities	320 HARVEST DR		20 yrs. CARL JOHNSON FACILITIES & EQUIPMENT MANAGER CITY OF WATSONVILLE

STATEMENT OF QUALIFICATIONS

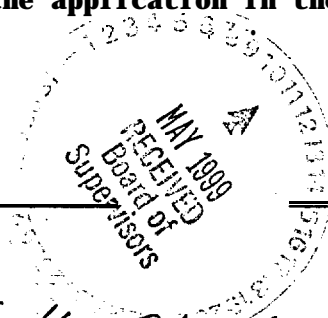
Please attach a brief statement indicating why you are interested in serving on the advisory body in question and why you are qualified for the appointment.

CERTIFICATION

I certify that the above information is true and correct and I authorize the verification of the information in the application in the event I am a finalist for the appointment.

Carl Johnson

Signature



5-10-99

Date

As a management employee of the City of Watsonville I've had experience compiling and implementing the Disaster Plan for the City. During my tenure with the City there have been 4 major disasters where my responsibilities were in operations, Planning and Logistics.