



CITY OF NEW YORK

MANHATTAN COMMUNITY BOARD 4

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www.nyc.gov/mcb4

CHISTRINE BERTHET
Chair

ROBERT J. BENFATTO, ESQ

APPLICATION FOR PUBLIC MEMBERSHIP

Please Print

Name: _____

Home Phone: _____ Work Phone: _____

Fax: _____ e-mail: _____

Address: _____ Zip Code: _____

CB4's committees/taskforces are listed below with regular meeting information. Please mark your first preference with a 1, your second preference with a 2, etc. to the left of the committee name. Do not mark any committee/taskforce on which you are not willing to serve. You may mark just one.

Committee Name

Meeting Info

Table with 2 columns: Committee Name and Meeting Info. Rows include Business Licenses & Permits, Chelsea Land Use, Clinton/Hell's Kitchen Land Use, Housing, Health & Human Services, Landmarks Committee, Transportation Planning, Quality of Life / Education, Libraries and Cultural Affairs, and Waterfront and Parks.

The issues facing our neighborhood today that most concern you:

I have worked to improve the quality of life in our neighborhood in the following way(s):

I bring the following special training, skills, and experience to the committee:

I understand that as a public member of a Manhattan Community Board 4 committee I will be expected to attend all regularly scheduled meetings and to actively participate in committee work and deliberations. I also understand that I may be removed from the committee if my attendance at meetings is irregular or for other reasons determined by the board chair.

Signature: _____ Date: _____

Please return by postal mail or fax