COMMUNITY AIR PROTECTION PROGRAM (AB 617) STEERING COMMITTEE

Would you like to help reduce air pollution in your community?

The Sacramento Metropolitan Air Quality Management District is looking for **South Sacramento/Florin community members** to serve on an Air Quality Steering Committee. This committee will work with the District to identify ways to reduce local air pollution and improve air quality in the South Sacramento/Florin community. Committee members may be eligible to receive a stipend.



Who is eligible to join the Committee?

• You are eligible if you live, work at, or own a business within the South Sacramento/Florin community boundary, or if you are part of a community organization that operates within the community boundary (see map on application)

Joining the committee is an excellent opportunity to:

- Advocate for clean, healthy air in your community
- Build connections with other committee members
- Help reduce air pollution and improve the health of your neighborhood

If I join the Committee, what is my commitment?

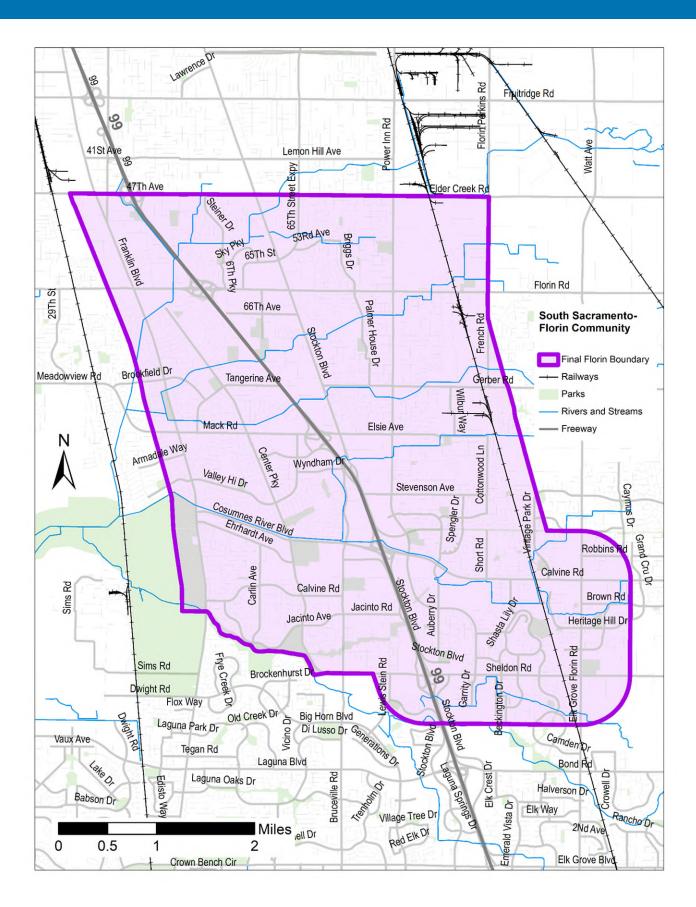
- Attend monthly meetings (currently in-person with a remote option)
- Encouraged to join a subcommittee and work with other members on specific projects
- Serve for two years, with the option to renew

Please submit online application at sacramentoaqmd.seamlessdocs.com/f/English
Or print out the form below and mail it to: Sac Metro Air District, Attn: AB 617 Steering Committee, 777 12th Street, Ste. 300, Sacramento, CA 95814.



Where is the South Sacramento/Florin community?

The community boundaries are 47th Avenue/Elder Creek Road on the north, Florin Perkins Road/French Road and along the rail line on the east, past or along Sheldon Road on the south, and past Franklin Boulevard on the west.



Air Quality Steering Committee APPLICATION



Address:	Zip Code:	
Email:	Phone Number:	
•	e South Sacramento/Florin community? If you represent a community organization, ganization Application (form below).	
I live here	I work at a business here	
If you work at or own a busine	ess here, please provide the workplace or business name and street address below.	
please include an additional po	the Air Quality Steering Committee? <i>If you need more space for your responses, age.</i> anizations, clubs, teams, or groups in the South Sac/Florin community, and are any of	
these youth oriented?		
What skills, experience, or kno	owledge will you bring to the Committee to help serve the community?	
nisleading information determi quality Steering Committee. Up	application may or may not be approved by the District. If approved, any false or ned by the District in this application may result in my release as a member of the Ai on the approval of the application, additional information or documentation may be al process for the Steering Committee.	
Signature	Date	

Air Quality Steering Committee APPLICATION



If you are a community organization (i.e. school district, faith-based organization, business organization, or environmental justice organization) that operates within the community boundary and would like to be represented on the Committee, please provide the following organization information. If you need more space for your responses, please include an additional page.

Name of Organization:	
Address:	Zip Code:
Full Name of Executive Director/President:	
Title of Executive Director/President:	
Executive Director/President Email:	
Executive Director/President Phone Number:	
About Your Organization Please describe your organization's connection to the Southmembers.	n Sacramento/Florin community and its
What experience does your organization have serving the S within the geographic boundary shown above? Please briefly	•
Approximately how many members are currently in your org	ganization?
If applicable, when was the organization established?	
	-

Please provide the following informations as a representative of your organization	on for the person(s) who will serve on the Steering Committed	
Primary Representative	Alternate Representative (optional)	
Full Name of Primary Representative:		
Primary Representative Email:		
Primary Representative Phone Numbe	r:	
(Optional)		
Full Name of Alternate Representative	:	
Alternate Representative Email:		
Alternate Representative Phone Numb	er:	
misleading information determined by the Dist	y or may not be approved by the District. If approved, any false or trict in this application may result in my release as a member of the Air al of the application, additional information or documentation may be he Steering Committee.	
Signature	Date	