



City of Calistoga  
City Manager

NOV 16 2018

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# CITY of CALISTOGA

## BOARDS AND COMMISSIONS APPLICATION

Citizens are encouraged to serve on the various City commissions. Applications will be reviewed and interviews may be scheduled with the City Council. Commission appointments are made at a regular meeting of the City Council.

Application for:

- City Active Transportation Advisory Committee
- City Building Standards Advisory and Appeals Board
- Calistoga Community Pool Advisory Comm.
- County Library Commission
- Napa County Active Transportation Committee
- Napa County Local Food Advisory Council
- Napa County Measure A Financial Oversight Committee
- Napa County Mosquito Abatement Board
- City Planning Commission
- Other Committees \_\_\_\_\_

Name: Allan Last Douglas First C M.I.

Telephone: [Redacted] Home [Redacted] Business [Redacted] Facsimile

E-mail Address: [Redacted]

Physical Address of Residence: [Redacted], Calistoga

Mailing Address: Same

Business Address: None

Occupation: Winery Executive

Are you a resident of the City of Calistoga? Yes  No  Years of residency: 5

Education and/or related background: B.S. from Cornell University  
M.B.A. from UC Irvine

Licenses or special certificates held: Diploma of Wine + Spirits, Wine + Spirit Education Trust

Organizations to which you belong (professional, technical, community, services): None

State specifically why you wish to serve, why you believe you are qualified for the position, and what you might contribute to the group:

See attached

(Use additional paper, if necessary)

References (include name and daytime phone number: (1) Alissa McNair - [REDACTED]  
(2) Gary Krauss [REDACTED]

List any other committees/commissions on which you have served, and the year(s) of service:

None, yet.

**Please Note:** Appointment to this position may require you to file a conflict of interest disclosure statement with the City Clerk. This information is a public record and these statements are available to the public on request.

I have read, understand, and will abide by this statement (please initial) DA.

I have sufficient time to devote to this responsibility and plan to attend the required meetings if I am appointed to fill a vacancy

11/15/18  
Date

[Signature]  
Signature of Applicant

Completed application should be returned to

City Clerk  
1232 Washington Street  
Calistoga, CA 94515

For questions please call the City Clerk at (707) 942-2807.

**City of Calistoga Boards and Commissions Application**

**Name:** Douglas Allan

**Phone:** 707-339-6641

**Email:** doug.calistoga@gmail.com

**Physical Address of Residence:** 224 High Street, Calistoga, CA 94515

**Mailing Address:** Same

**Business Address:** None

**Occupation:** Winery Executive

**Are you a resident of Calistoga?** Yes

**Years of residency?** 5 year

**Education and/or related background:** B.S. from Cornell University, M.B.A. from UC Irvine

**Licenses or special certifications:** Diploma of Wine & Spirits from Wine & Spirit Education Trust

**Organizations to which you belong (professional, technical, community, services):** None

**State specifically why you wish to serve, why you believe you are qualified for the position, and what you might contribute to the group:**

After working in Calistoga for many years (while living in Napa), I moved here with my wife five years ago. We subsequently purchased a home (224 High Street) and had a daughter whom we intend to raise and send to public school in Calistoga. With that intention, I am motivated to sustain, and improve, the quality of life in the community for the benefit of my daughter, her peers, and the community at large. I am well-educated, professionally accomplished, and very active within my "sub-community" in the city, especially within our young family peer group. What I hope to contribute to the group is the perspective from a level-headed, fair-minded young father raising a family in Calistoga. I understand there are many different communities within this small city but I welcome the opportunity to provide an active voice representing my peers (young professionals and families) in our local government. I have followed, and reviewed, many of the recent planning commission debates such as the real estate office on Lincoln, the Washington Street apartments, and the gas station. I look forward to joining the Planning Commission, becoming more active in the community, and representing the future of Calistoga.

**References:**

Alissa McNair – [REDACTED]

Gary Krauss – [REDACTED]

**List any other committees/commissions on which you have served, and the year(s) of service:**

None yet



Organizations to which you belong (professional, technical, community, services): Native Sons of the Golden West, Calistoga Wine Makers Group, Calistoga Young Peoples Taco Tuesday.

State specifically why you wish to serve, why you believe you are qualified for the position, and what you might contribute to the group:

I believe in helping Calistoga stay real and relevant. I want a real community that represents a vital town. I believe that my life and beliefs can truly help Calistoga prosper and lead the way in small town life.  
(Use additional paper, if necessary)

References (include name and daytime phone number): (1) Gert Sinnes [REDACTED]  
(2) Francois Peschon [REDACTED]

List any other committees/commissions on which you have served, and the year(s) of service:  
\_\_\_\_\_  
\_\_\_\_\_

**Please Note:** Appointment to this position may require you to file a conflict of interest disclosure statement with the City Clerk. This information is a public record and these statements are available to the public on request.

I have read, understand, and will abide by this statement (please initial) [Signature]

I have sufficient time to devote to this responsibility and plan to attend the required meetings if I am appointed to fill a vacancy

11-12-2018  
Date

[Signature]  
Signature of Applicant

Completed application should be returned to

City Clerk  
1232 Washington Street  
Calistoga, CA 94515



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OCT 31 2018

CITY of CALISTOGA

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- City Building Standards and Advisory Appeals Board
- City Green Committee
- County Library Commission
- Napa County Bicycle Advisory Committee
- Napa County Measure A Financial Oversight Committee
- Napa County Mosquito Abatement Board
- City Planning Commission
- Other Committees \_\_\_\_\_

Name: Coates Paul W  
Last First M.I.

Telephone: [REDACTED] [REDACTED] [REDACTED]  
Home Business Facsimile

E-mail Address: [REDACTED]

Physical Address of Residence: [REDACTED], Calistoga, CA 94515

Mailing Address: [REDACTED], Calistoga, CA 94515

Business Address: \_\_\_\_\_

Occupation: general contractor

Are you a resident of the City of Calistoga? Yes  No  Years of residency: \_\_\_\_\_

Education and/or related background: General Contractor 40 years;

AA Ergonomy

Licenses or special certificates held:

General Contractors License #505964 & 382019

EPA Lead Certification

Organizations to which you belong (professional, technical, community, services): \_\_\_\_\_

American Legion

State specifically why you wish to serve, why you believe you are qualified for the position, and what you might contribute to the group:

I would like to continue to improve relationships with the public, along with streamlining the application process. I would like to improve opportunities for more housing at all levels in our community and promote more commercial investments in town

(Use additional paper, if necessary)

References (include name and daytime phone number: (1) Jim Barnes [REDACTED]

(2) Sharon Carone [REDACTED]

List any other committees/commissions on which you have served, and the year(s) of service:

Vice mayor and council member 4 yrs ; Building Standards Advisory and Appeals Board ; Calistoga Design Review Board ; Board Member of Napa Valley Flood Control

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I have read, understand, and will abide by this statement (please initial) \_\_\_\_\_.

I have sufficient time to devote to this responsibility and plan to attend the required meetings if I am appointed to fill a vacancy

11/1/16  
Date

  
Signature of Applicant

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- Napa County Mosquito Abatement Board
- City Planning Commission
- Other Committees \_\_\_\_\_

Name: Cooper Scott D  
Last First M.I.

Telephone: [REDACTED] [REDACTED] [REDACTED]  
Home Business Facsimile

E-mail Address: [REDACTED]

Physical Address of Residence: [REDACTED] Calistoga

Mailing Address: [REDACTED]

Business Address: [REDACTED] Angwin CA 94508

Occupation: Real Estate agent - Mortgage

Are you a resident of the City of Calistoga? Yes  No  Years of residency: 25

Education and/or related background: BA in Marketing

Licenses or special certificates held:  
Real Estate license



Organizations to which you belong (professional, technical, community, services): Rotary, AFFJ  
Free Masons,

State specifically why you wish to serve, why you believe you are qualified for the position, and what you might contribute to the group:

I would like to continue with my on going Planning Commissioner role

(Use additional paper, if necessary)

References (include name and daytime phone number: (1) Dr. James White [REDACTED]  
(2) Dr. Doug Cooper [REDACTED]

List any other committees/commissions on which you have served, and the year(s) of service:

Rotary Club President 2017-2018

Calistoga Planning Commissioner 2014 to present

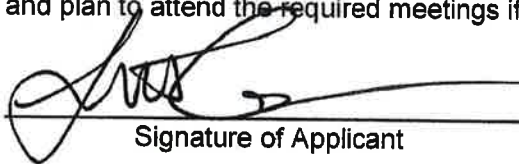
**Please Note:** Appointment to this position may require you to file a conflict of interest disclosure statement with the City Clerk. This information is a public record and these statements are available to the public on request.

I have read, understand, and will abide by this statement (please initial) SC

I have sufficient time to devote to this responsibility and plan to attend the required meetings if I am appointed to fill a vacancy

11/06/2018

Date

  
Signature of Applicant

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Organizations to which you belong (professional, technical, community, services): CMAA, CAI,  
CACM, CMIA, Guild of Sommeliers

State specifically why you wish to serve, why you believe you are qualified for the position, and what you might contribute to the group:

Throughout my career I have been involved with clubs and HOA  
communities that were going through major transformation i.e.  
remodeling, renovations, rebuilding, and upstarts. I manage  
Environmental and Architectural Control Committees.

(Use additional paper, if necessary)

References (include name and daytime phone number: (1) \_\_\_\_\_  
(2) \_\_\_\_\_

List any other committees/commissions on which you have served, and the year(s) of service:  
\_\_\_\_\_  
\_\_\_\_\_

**Please Note:** Appointment to this position may require you to file a conflict of interest disclosure statement with the City Clerk. This information is a public record and these statements are available to the public on request.  
I have read, understand, and will abide by this statement (please initial) EES.

I have sufficient time to devote to this responsibility and plan to attend the required meetings if I am appointed to fill a vacancy

11/5/2018  
Date

Edward J. Simpson  
Signature of Applicant

Completed application should be returned to

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Calistoga, CA 94515

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- County Library Commission
- Napa County Bicycle Advisory Committee
- Napa County Measure A Financial Oversight Committee
- Napa County Mosquito Abatement Board
- City Planning Commission
- Other Committees \_\_\_\_\_

Name: Suhr Brad  
Last First M.I.

Telephone: [Redacted] [Redacted]  
Home Business Facsimile

E-mail Address: [Redacted]

Physical Address of Residence: [Redacted] Calistoga, CA 94515

Mailing Address: Same

Business Address: [Redacted] Calistoga, CA 94515

Occupation: Business Owner

Are you a resident of the City of Calistoga? Yes  No  Years of residency: 10 + years

Education and/or related background: 4-Year Degree

Licenses or special certificates held:  
\_\_\_\_\_  
\_\_\_\_\_

Organizations to which you belong (professional, technical, community, services): A.T.A.C.

State specifically why you wish to serve, why you believe you are qualified for the position, and what you might contribute to the group:

I would like to continue on the ATAC to help further active transportation  
in Calistoga

(Use additional paper, if necessary)

References (include name and daytime phone number: (1) \_\_\_\_\_

(2) \_\_\_\_\_

List any other committees/commissions on which you have served, and the year(s) of service:

\_\_\_\_\_  
\_\_\_\_\_

**Please Note:** Appointment to this position may require you to file a conflict of interest disclosure statement with the City Clerk. This information is a public record and these statements are available to the public on request.

I have read, understand, and will abide by this statement (please initial) BS

I have sufficient time to devote to this responsibility and plan to attend the required meetings if I am appointed to fill a vacancy

12/4/18

Date



Digitally signed by Brad Suhr  
DN: cn=Brad Suhr, o=Calistoga  
Bikeshop, ou,  
email=calbikes@gmail.com, c=US  
Date: 2018.12.04 17:48:06 -08'00'

Signature of Applicant

Completed application should be returned to

City Clerk  
1232 Washington Street  
Calistoga, CA 94515

For questions please call the City Clerk at (707) 942-2807.



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Application for:

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> City Active Transportation Advisory Committee | <input type="checkbox"/> Napa County Active Transportation Committee         |
| <input type="checkbox"/> City Building Standards Advisory and Appeals Board       | <input type="checkbox"/> Napa County Local Food Advisory Council             |
| <input type="checkbox"/> Calistoga Community Pool Advisory Comm.                  | <input type="checkbox"/> Napa County Measure A Financial Oversight Committee |
| <input type="checkbox"/> County Library Commission                                | <input type="checkbox"/> Napa County Mosquito Abatement Board                |
|   | <input type="checkbox"/> City Planning Commission                            |
|   | <input type="checkbox"/> Other Committees _____                              |

Name: Gonzalez Efrain \_\_\_\_\_  
Last First M.I.

Telephone: (707) [REDACTED] \_\_\_\_\_  
Home Business Facsimile

E-mail Address: [REDACTED] \_\_\_\_\_

Physical Address of Residence: [REDACTED] Calistoga, Ca. \_\_\_\_\_

Mailing Address: [REDACTED] Calistoga, Ca. \_\_\_\_\_

Business Address: \_\_\_\_\_

Occupation: massage therapist. \_\_\_\_\_

Are you a resident of the City of Calistoga? Yes  No  Years of residency: 30 \_\_\_\_\_

Education and/or related background: \_\_\_\_\_  
\_\_\_\_\_

Licenses or special certificates held: massage therapist. \_\_\_\_\_  
\_\_\_\_\_

Organizations to which you belong (professional, technical, community, services): \_\_\_\_\_

State specifically why you wish to serve, why you believe you are qualified for the position, and what you might contribute to the group:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Use additional paper, if necessary)

References (include name and daytime phone number: (1) Tom Sherman  
(2) \_\_\_\_\_

List any other committees/commissions on which you have served, and the year(s) of service:

AVAC - 4 Years  
\_\_\_\_\_  
\_\_\_\_\_

**Please Note:** Appointment to this position may require you to file a conflict of interest disclosure statement with the City Clerk. This information is a public record and these statements are available to the public on request.

I have read, understand, and will abide by this statement (please initial) EG.

I have sufficient time to devote to this responsibility and plan to attend the required meetings if I am appointed to fill a vacancy

11-5-18  
Date

[Signature]  
Signature of Applicant

Completed application should be returned to

City Clerk  
1232 Washington Street  
Calistoga, CA 94515

For questions please call the City Clerk at (707) 942-2807.



CITY OF CALISTOGA  
CITY CLERK

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## BOARDS AND COMMISSIONS APPLICATION

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Application for:

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> City Active Transportation Advisory Committee | <input type="checkbox"/> Napa County Active Transportation Committee         |
| <input type="checkbox"/> City Building Standards Advisory and Appeals Board       | <input type="checkbox"/> Napa County Local Food Advisory Council             |
| <input type="checkbox"/> Calistoga Community Pool Advisory Comm.                  | <input type="checkbox"/> Napa County Measure A Financial Oversight Committee |
| <input type="checkbox"/> County Library Commission                                | <input type="checkbox"/> Napa County Mosquito Abatement Board                |
|   | <input type="checkbox"/> City Planning Commission                            |
|   | <input type="checkbox"/> Other Committees _____                              |

Name: Hagberg David L.  
Last First M.I.

Telephone: \_\_\_\_\_  
Home Business Facsimile

E-mail Address: \_\_\_\_\_

Physical Address of Residence: \_\_\_\_\_, Calistoga

Mailing Address: \_\_\_\_\_, Calistoga

Business Address: \_\_\_\_\_

Occupation: Retired Teacher

Are you a resident of the City of Calistoga? Yes  No  Years of residency: 1 1/2 yrs

Education and/or related background: Retired Teacher

Licenses or special certificates held: California Single Subject Teaching Credential, English



Organizations to which you belong (professional, technical, community, services): N/A

State specifically why you wish to serve, why you believe you are qualified for the position, and what you might contribute to the group:

My wife, Erin, and I enjoy hiking, walking, biking and being outdoors. One of the things we appreciate the most about our community is its "walkability" and attention to promoting healthy activities. Because I am recently retired, my schedule is flexible and I will readily available  
(Use additional paper, if necessary) as needed.

References (include name and daytime phone number: (1) Bob Beck [redacted]  
(2) Charles Henning [redacted]

List any other committees/commissions on which you have served, and the year(s) of service:

N/A

**Please Note:** Appointment to this position may require you to file a conflict of interest disclosure statement with the City Clerk. This information is a public record and these statements are available to the public on request.

I have read, understand, and will abide by this statement (please initial) D.S.

I have sufficient time to devote to this responsibility and plan to attend the required meetings if I am appointed to fill a vacancy

10/30/18  
Date

[Signature]  
Signature of Applicant

Completed application should be returned to

City Clerk  
1232 Washington Street  
Calistoga, CA 94515



CITY OF CALISTOGA  
CITY CLERK

OCT 31 2018

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Application for:

- |  |  |
|--|--|
| <input type="checkbox"/> City Active Transportation Advisory Committee                 | <input type="checkbox"/> Napa County Active Transportation Committee         |
| <input checked="" type="checkbox"/> City Building Standards Advisory and Appeals Board | <input type="checkbox"/> Napa County Local Food Advisory Council             |
| <input type="checkbox"/> Calistoga Community Pool Advisory Comm.                       | <input type="checkbox"/> Napa County Measure A Financial Oversight Committee |
| <input type="checkbox"/> County Library Commission                                     | <input type="checkbox"/> Napa County Mosquito Abatement Board                |
|  | <input type="checkbox"/> City Planning Commission                            |
|  | <input type="checkbox"/> Other Committees _____                              |

Name: Coates Kate \_\_\_\_\_  
Last First M.I.

Telephone: [REDACTED] [REDACTED] NONE  
Home Business Facsimile

E-mail Address: [REDACTED]

Physical Address of Residence: [REDACTED], Calistoga, CA 94515

Mailing Address: [REDACTED] Calistoga, Ca 94515

Business Address: \_\_\_\_\_

Occupation: retired

Are you a resident of the City of Calistoga? Yes  No  Years of residency: 28 yrs

Education and/or related background: \_\_\_\_\_

Licenses or special certificates held:  
General Contractors License

Organizations to which you belong (professional, technical, community, services): \_\_\_\_\_

State specifically why you wish to serve, why you believe you are qualified for the position, and what you might contribute to the group:

I have experience in the construction industry. I am well versed on ADA issues since I am wheelchair bound. Based on these experiences, I believe that I could provide valuable input in issues regarding accessibility that confront our city.

(Use additional paper, if necessary)

References (include name and daytime phone number: (1) \_\_\_\_\_

(2) \_\_\_\_\_

List any other committees/commissions on which you have served, and the year(s) of service:

\_\_\_\_\_  
\_\_\_\_\_

**Please Note:** Appointment to this position may require you to file a conflict of interest disclosure statement with the City Clerk. This information is a public record and these statements are available to the public on request.

I have read, understand, and will abide by this statement (please initial) \_\_\_\_\_.

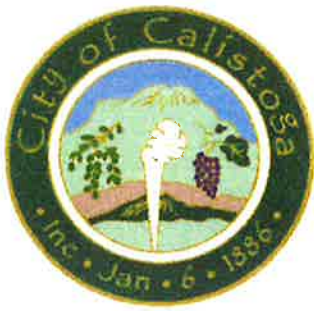
I have sufficient time to devote to this responsibility and plan to attend the required meetings if I am appointed to fill a vacancy

11/1/18  
Date

*Kate Coates*  
Signature of Applicant

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City Clerk  
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Calistoga, CA 94515



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Application for:

- |  |  |
|--|--|
| <input type="checkbox"/> City Active Transportation Advisory Committee                 | <input type="checkbox"/> Napa County Bicycle Advisory Committee              |
| <input checked="" type="checkbox"/> City Building Standards and Advisory Appeals Board | <input type="checkbox"/> Napa County Measure A Financial Oversight Committee |
| <input type="checkbox"/> City Green Committee  | <input type="checkbox"/> Napa County Mosquito Abatement Board                |
| <input type="checkbox"/> County Library Commission                                     | <input type="checkbox"/> City Planning Commission                            |
|  | <input type="checkbox"/> Other Committees _____                              |

Name: Coates Paul W  
Last First M.I.

Telephone: [REDACTED] [REDACTED] [REDACTED]  
Home Business Facsimile

E-mail Address: [REDACTED]

Physical Address of Residence: [REDACTED], Calistoga, CA 94515

Mailing Address: [REDACTED], Calistoga, CA 94515

Business Address: \_\_\_\_\_

Occupation: general contractor

Are you a resident of the City of Calistoga? Yes  No  Years of residency: \_\_\_\_\_

Education and/or related background: General Contractor 40 years;

AA Argonomy

Licenses or special certificates held:

General Contractors License #509964 & 382019

EPA Lead Certification

Organizations to which you belong (professional, technical, community, services): \_\_\_\_\_

American Legion

State specifically why you wish to serve, why you believe you are qualified for the position, and what you might contribute to the group:

We need to establish solutions to long term problems and work with the city we serve. I have extensive knowledge in planning and development, and in interpreting and implementing rules and regulations

(Use additional paper, if necessary)

References (include name and daytime phone number: (1) Jim Barnes [redacted]

(2) Sharon Carone [redacted]

List any other committees/commissions on which you have served, and the year(s) of service:

Vice mayor and council member 4 yrs; Building Standards Advisory and Appeals Board; Calistoga Design Review Board; Board member of Napa Valley Flood Control

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I have read, understand, and will abide by this statement (please initial) \_\_\_\_\_.

I have sufficient time to devote to this responsibility and plan to attend the required meetings if I am appointed to fill a vacancy

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