



CITY OF LIVINGSTON, MONTANA APPLICATION  
FOR THE LIVINGSTON TOURISM BUSINESS IMPROVEMENT DISTRICT (LTBID)  
BOARD OF TRUSTEES

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Email: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Name of Property Owned within the District: \_\_\_\_\_

Address of Property: \_\_\_\_\_

Are you the owner of the property within the District, or the designee of an owner of property within the District?                      Yes                      No

I \_\_\_\_\_ certify that I am a property owner within the District and I am duly authorized to either serve on the Board of Trustees or appoint \_\_\_\_\_ as my designee.

\_\_\_\_\_ Property Owner Signature Date \_\_\_\_\_

PLEASE NOTE: An application from the manager of a hotel must contain a signed statement from the owner indicating that the hotel manager is authorized to represent the owner or a note from the corporate officer authorized to represent the board.

Have you ever served on a City or County board? \_\_\_\_\_  
(If so, where, what board, and how long?)

Please explain your relevant qualifications, interests, and experiences.

References (Individual or Organization) Name:	Phone:
_____	_____
_____	_____

*This application is considered public record.*

Please print and sign this application where appropriate and mail to:  
Livingston Tourism Business Improvement District  
PO Box 348, Livingston, MT 59047  
Or email to: [info@explorelivingstonmt.com](mailto:info@explorelivingstonmt.com)