



## City of Hyde Park, Utah Application for City Council Vacancy

Applications must be submitted via email to  
[donja.w@hpcutah.gov](mailto:donja.w@hpcutah.gov) or in person to the Hyde  
Park City office no later than

**Thursday September 17, 2026, at 5:00p.m.**

Interviews will be held on September 23, 2026, at City  
Council

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(Print Name)

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Address

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Phone

Email

☐ (Optional) I wish to classify my addresses listed above as a protected record. By doing so, you must  
provide an alternative address or phone number. Utah Code § 63G-2-305(52)

Alternative Address or Phone Number: \_\_\_\_\_

I understand that the term of this office will be from September 23, 2026, to January 1, 2028.

I state that I meet the following qualifications for the office of City Council

### **MUNICIPAL CANDIDATE**

- I am a registered voter of Hyde Park City.
- I have resided in Hyde Park City for the previous 12 consecutive months.
- I have not been declared mentally incompetent by a court of law.
- I have not been convicted of a felony, treason, or a crime against the elective franchise unless the right to hold elective office has been restored.
- I have submitted a Conflict-of-Interest Disclosure.
- I have submitted a Campaign Finance Disclosure Report.

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**Signature of Applicant**

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**Date**

**Applicants must submit the following with this form:**

- An application with completed interview questions

- A Conflict-of-Interest Disclosure Form
- A Campaign Finance Disclosure Report

*All application materials submitted to the City are public records and may be disclosed in accordance with the Utah Government Records Access and Management Act (GRAMA).*

# Hyde Park City Council – Interview Questions

Please give concise answers to the questions below.

Do not name any specific developers, individuals, or entities in the City.

1. **Smart Growth:** In a growing city, what does “smart growth” mean to you in practical terms?

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2. **Where to Grow (and why):** Where should the city concentrate growth, and what criteria would you use to guide those decisions (e.g., infrastructure capacity, fiscal impact, neighborhood compatibility, and market demand)?

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3. **Compatibility:** A project complies with zoning but conflicts with the surrounding area’s character. How would you address compatibility (e.g., setbacks, height transitions, frontage/street design, open space, and phasing)?

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4. **Fiscal Impacts Checklist:** How do you evaluate the fiscal impact of growth? What’s on your checklist for one-time versus ongoing costs and revenues?

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5. **Conflicts of Interest:** When would you disclose a conflict of interest, and when would you recuse yourself from the conversation?

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6. **Vested Rights:** How do you handle vested rights when they conflict with adjacent property owners’ interests—or with your personal opinion?

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7. **Balanced Growth + Local Economy:** Some residents feel growth is too fast; others want more retail, dining, and jobs to create a more self-sufficient economy. What incentives, policy changes, or zoning strategies would you propose to attract neighborhood-scale retail and high-value employers?

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# CANDIDATE CONFLICT OF INTEREST DISCLOSURE FORM

The following disclosures are required to be made by all municipal candidates for the City of Hyde Park pursuant to Utah Code Annotated § [10-3-1313](#), § [20A-11-1604\(6\)](#), & [10-3-301.5](#)

If additional space is needed, please use a separate sheet of paper. Per statute, the information provided shall be kept on file with the City Recorder and shall be posted to the City website with links provided to the Lieutenant Governor.

I, \_\_\_\_\_, am a candidate for  
- \_\_\_\_\_ in the City of Hyde Park  
Municipal Election.

- 1) \*The name and address of each of the regulated officeholder's current employers and each of the regulated officeholder's employers during the preceding year; and for each employer described, a brief description of the employment, including the regulated officeholder's occupation and, as applicable, job title.

|                          |                           |
|--------------------------|---------------------------|
| Business Name & Address: | Description and Position: |
|                          |                           |
| Business Name & Address: | Description and Position: |
|                          |                           |

(\*If a regulated officeholder or regulated officeholder's spouse is an at-risk government employee, as that term is defined in Subsection 63G-2-303(1)(a), the regulated officeholder may request the filing officer to redact from the conflict-of-interest disclosure: (i) the regulated officeholder's employment information, and (ii) the regulated officeholder's spouse's name and employment information.)

- 2) For each entity in which the regulated officeholder is an owner or officer, or was the owner or officer during the preceding year: the name of each entity; a brief description of the type of business or activity conducted by the entity; and the regulated officeholder's position in the entity:

|                       |                                         |
|-----------------------|-----------------------------------------|
| Entity Name:          | Type of Business or Activity of Entity: |
|                       |                                         |
| Position with Entity: |                                         |
| Entity Name:          | Type of Business or Activity of Entity: |
|                       |                                         |
| Position with Entity: |                                         |

- 3) \*\*Each individual from whom, or entity from which, the regulated officeholder has received \$5,000 or more in income during the preceding year: the name of the individual or entity; and a brief description of the type of business or activity conducted by the individual or entity:

| Individual or Entity Name: | Type of Business or Activity of Individual or Entity: |
|----------------------------|-------------------------------------------------------|
|                            |                                                       |
|                            |                                                       |
|                            |                                                       |

*(\*\*In making the disclosure described, a regulated officeholder who provides goods or services to multiple customers or clients as part of a business or a licensed profession is only required to provide the information described in relation to the entity or practice through which the regulated officeholder provides the goods or services and is not required to provide the information in relation to the regulated officeholder's individual customers or clients.)*

- 4) For each entity in which the regulated officeholder holds any stocks or bonds having a fair market value of \$5,000 or more as of the date of the disclosure form or during the preceding year, but excluding funds that are managed by a third party, including blind trusts, managed investment accounts, and mutual funds: the name of the entity; and a brief description of the type of business or activity conducted by the entity:

| Entity Name: | Type of Business or Activity of Entity: |
|--------------|-----------------------------------------|
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|              |                                         |

- 5) For each entity not listed above in which the regulated officeholder currently serves, or served in the preceding year, in a paid leadership capacity or in a paid or unpaid position on a board of directors: the name of the entity or organization; a brief description of the type of business or activity conducted by the entity; and the type of position held by the regulated officeholder:

| Entity Name and position held: | Type of Business or Activity of Entity: |
|--------------------------------|-----------------------------------------|
|                                |                                         |
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|                                |                                         |

- 6) At the option of the regulated officeholder, a description of any real property in which the regulated officeholder holds an ownership or other financial interest that the regulated officeholder believes may constitute a conflict of interest, including a description of the type of interest held by the regulated officeholder in the property:

| Description of Property: | Interest Held: |
|--------------------------|----------------|
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- 7) Name of regulated officeholder's spouse; and \*the name of each of the regulated officeholder's spouse's current employers and each of the regulated officeholder's spouse's employers during the preceding year, if the regulated officeholder believes the employment may constitute a conflict of interest;

|              |                          |
|--------------|--------------------------|
| Spouse Name: | Business Name & Address: |
| Occupation:  |                          |
| Occupation:  | Business Name & Address: |

\*If a regulated officeholder or regulated officeholder's spouse is an at-risk government employee, as that term is defined in Subsection 63G-2-303(1)(a), the regulated officeholder may request the filing officer to redact from the conflict-of-interest disclosure: (i) the regulated officeholder's employment information, and (ii) the regulated officeholder's spouse's name and employment information.

- 8) The name of any adult residing in the regulated officeholder's household who is not related to the officeholder by blood; and for each adult described, a brief description of the employment and occupation, if the regulated officeholder believes the adult's presence in the regulated officeholder's household may constitute a conflict of interest;

|             |                          |
|-------------|--------------------------|
| Name:       | Business Name & Address: |
| Occupation: |                          |
| Name:       | Business Name & Address: |
| Occupation: |                          |

- 9) At the option of the officeholder, a description of any other matter or interest that the regulated officeholder believes may constitute a conflict of interest;

Description of Conflict:

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By signing below, I acknowledge that the form is true and accurate to the best of my knowledge.

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Signature

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Date



**HYDE PARK MUNICIPAL VACANCY**  
**CAMPAIGN FINANCE STATEMENT REPORT**  
**OF CONTRIBUTIONS AND EXPENDITURES**  
([Utah Code Annotated § 20A-1-510](#), [§ 10-3-208](#), [§ 10-3-209](#))  
**CAMPAIGN FINANCIAL REPORT**

To \_\_\_\_\_  
\_\_\_\_\_ of \_\_\_\_\_  
(City Recorder / Town Clerk) (Municipality)

For \_\_\_\_\_  
  
Full name of candidate \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_, Utah Zip Code \_\_\_\_\_

Name of office \_\_\_\_\_ (District \_\_\_\_\_)

*Contributions*

1a. Aggregate total of contributions under \$500.00 ..... \$ \_\_\_\_\_

OR

1b. Itemized total of contributions totaling \$500.00 or more ..... \$ \_\_\_\_\_

(Form "A" total from other side of this sheet)

*Expenditures*

2a. Aggregate total of campaign expenditures under \$500.00 ..... \$ \_\_\_\_\_

OR

2b. Itemized total of campaign expenditures ..... \$ \_\_\_\_\_

(Form "B" total from other side of this sheet)

3. Balance at the end of the reporting period ..... \$ \_\_\_\_\_

(Difference between lines 1 and 2)

Date \_\_\_\_\_ Signed \_\_\_\_\_  
(Candidate)

**NOTE:** If a candidate receives \$500 or less and spends \$500 or less, he or she can report the *total* amount of all contributions and expenditures.

**NOTE:** Utah election code 10-3-208 states that all municipalities shall adopt an ordinance establishing campaign finance disclosure requirements for candidates running for city or town office. You should check with your city recorder or town clerk for the disclosure requirements which pertain to your municipality.

**ITEMIZED CONTRIBUTION REPORT (Form "A")**

| Date Received | Name of Contributor | Amount of Contribution | In-Kind (if applicable) |
|---------------|---------------------|------------------------|-------------------------|
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(If additional space is needed, use blank paper and list information like the above format and then attach to report.)

**ITEMIZED EXPENDITURE REPORT (Form "B")**

| Date of Expenditure | Person or Organization To Whom Expenditure was made | Amount of Expenditure | Expenditure Purpose (optional) |
|---------------------|-----------------------------------------------------|-----------------------|--------------------------------|
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(If additional space is needed, use blank paper and list information like the above format and then attach to report.)