COMMUNITY ART PROJECT PROPOSAL		
APPLICANT INFORMATION		
Primary Contact Name (Albany Resident):		
Applicant Group Name (optional):		
Name of Additional Group Members (optional):		
Primary Contact Email:	Phone:	Alternate Phone:
Primary Contact Address:		
City: ALBANY	State: CA	ZIP Code:
ARTIST INFORMATION		
Project Artist (or Lead Artist):		
Artist Email:	Artist Phone:	Alternate Phone:
Address:	1	
City:	State:	ZIP Code:
List Any Additional Project Artists (optional):		
SITE INFORMATION		
Description of Site:		
Address:		Phone:
City: ALBANY	State: CA	ZIP Code:
Public Property (City of Albany) Private Property (readily visible/accessible to the public)		
Name of Private Property Owner:		
Address:		Phone:
City	State:	ZIP Code:
PROJECT SUMMARY		
Summarize the proposed Art in Public Places project in 50 words or less:		
ATTACHMENT CHECKLISK		
Project Description (maximum 2 pages, 12-point font, 1" margins)Visual Documentation of Site and Proposed DesignProject Budget (total budget including but not limited to this grant below \$10,000)Artist Resume or CV (include link to portfolio online if available)Letter of Commitment from Artist (optional)Evidence of Community Support		
SIGNATURES		
I verify that all information contained in this proposal is true and correct to the best of my knowledge.		
Signature:		Date:
Name (printed):		