

Project Name

Project Location

Primary Contact Information

Name

Organization Represented (if applicable)

Email

Phone

Project Partners

Please list any individuals and/or organizations that are part of your project team.

Fiscal Agent

Organization

Point of Contact

Email

Phone

Application Checklist

- Participation in (1) of the program information sessions (*attended or viewed video online*)
- Application (This Form)
- Slide Presentation (15-slides maximum, PDF format, 20 MB max. file size)
- Statement of Community Support
- Statement from Property Owner

By signing below, I certify that on behalf of my team, I have completed all necessary submission requirements for the *614 Beautiful Program*. I also acknowledge that I meet all eligibility requirements necessary and have committed no fraud or deception in applying for the program.

Signature

Name (Printed)

Date