

**NPG00**  
Administrative Use Only

**CITY OF TALLAHASSEE  
NEIGHBORHOOD PARTNERSHIP GRANT  
APPLICATION**

**Instructions to Applicants:**

Each application must include one original with support materials clearly labeled. See the checklist of items to be included.

Applications may be emailed to [John.Baker@talgov.com](mailto:John.Baker@talgov.com). Applications may also be mailed or hand delivered to: John Baker, Neighborhood Affairs Director, Smith-Williams Service Center, 2295 Pasco Street, Tallahassee, Florida, 32210.

**SECTION I - GENERAL INFORMATION**

**Project Title:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

**Incorporated:**  Yes  No **If yes, enclose a copy of the State of Florida Incorporation Certificate. If no, complete the following:**

**Association President:** \_\_\_\_\_

**Association Vice-President:** \_\_\_\_\_

**Association Secretary:** \_\_\_\_\_

**Association Treasurer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_ (Other)

**Authorized Applicant Representative (Print Name and Provide Signature)**

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)

**Project Manager**

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

**Contact Information: Phone #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**SECTION II - PROJECT DESCRIPTION**

**1. PROPOSED PROJECT**

(A) Describe your project. What will it produce? (e.g. physical improvement such as neighborhood entrance beautification, signage or landscaping; neighborhood lighting enhancements). If the project involves landscaping, please complete Table 2 contained in this application packet. For physical improvements, attach a set of construction plans (blueprints).

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(B) What is the specific location of your project? Two (2) photos of the current conditions of the project site are required. Also, please provide a written description and attach a map. To obtain a map, you must have the tax identification number for reference. Contact the Neighborhood Affairs Office at (850) 891-8773 for assistance, or inquire directly to the Leon County Tax Appraiser's office at (850) 488-6103.

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**(C) THINK THROUGH YOUR PROJECT! HOW WILL IT BE COMPLETED?** Describe the major activities that make up the project and give an estimated completion date for each. Be specific. List the task and then the estimated completion date or the number of days it will take to complete. (Use additional pages if necessary or include a table). Examples include:

<u>Item</u>	<u>Completion Date</u>
<b>Example:</b>	
<b>Sign Contract</b>	<b>11/2017</b>
<b>Prepare Bid</b>	<b>12/2017</b>
<b>Install Landscaping</b>	<b>2/2017</b>

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**(D) Maintenance of the project once it has been completed is important.** It is not the intent of this program to increase maintenance activities for city staff. As such, the applicant is required to provide the additional maintenance that may be necessary. Examples include: weeding planting beds, trimming trees, painting signs, etc.

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**(E) Who will perform the maintenance and how often?** Examples include: members of the beautification committee of the association, residents adjacent to the project, a contractor hired by the association, etc.

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**2. NEIGHBORHOOD IMPACT**

What is the intended benefit of the project? Why is it of importance to the neighborhood? (Use additional pages if necessary.)

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**3. PARTICIPATION**

(A) Neighborhood resident support and participation is critical to the award of a grant. Grant applications that demonstrate strong support will be given more consideration than those that do not. Describe how neighborhood support will be or has been obtained and who will participate. Provide letters from volunteers/supporters and/or signatures with phone numbers.

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(B) It is important to have the support of the residents immediately adjacent to a proposed physical improvement. As an example, if you are proposing to put a sign in the right of way next to a home, the resident should be contacted about the project.

Provide the Names, Addresses and Signatures of the owners of any adjacent properties regardless of their participation.

<u>Address</u>	<u>Owner Name (Print)</u>	<u>Signature</u>	<u>Date</u>	<u>Support (Yes or No)</u>
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(C) Please describe additional contributions that the neighborhood plans to make to support the project, such as in-kind labor, materials, or cash.

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**TOTAL REQUESTED** \$ \_\_\_\_\_

Neighborhood Contribution:

Monetary Contributions \$ \_\_\_\_\_

Material Contributions \$ \_\_\_\_\_

Labor Contributions

\_\_\_\_\_ hours @ \$ \_\_\_\_\_ / hour = \$ \_\_\_\_\_

**TOTAL PROJECT COST** \$ \_\_\_\_\_





## **APPLICATION CHECKLIST**

**Each application package should include:**

\_\_\_\_\_ **One original application with support materials clearly labeled**

\_\_\_\_\_ **One set of construction plans (blueprint) if applicable**

\_\_\_\_\_ **Signatures of owners adjacent to proposed project**

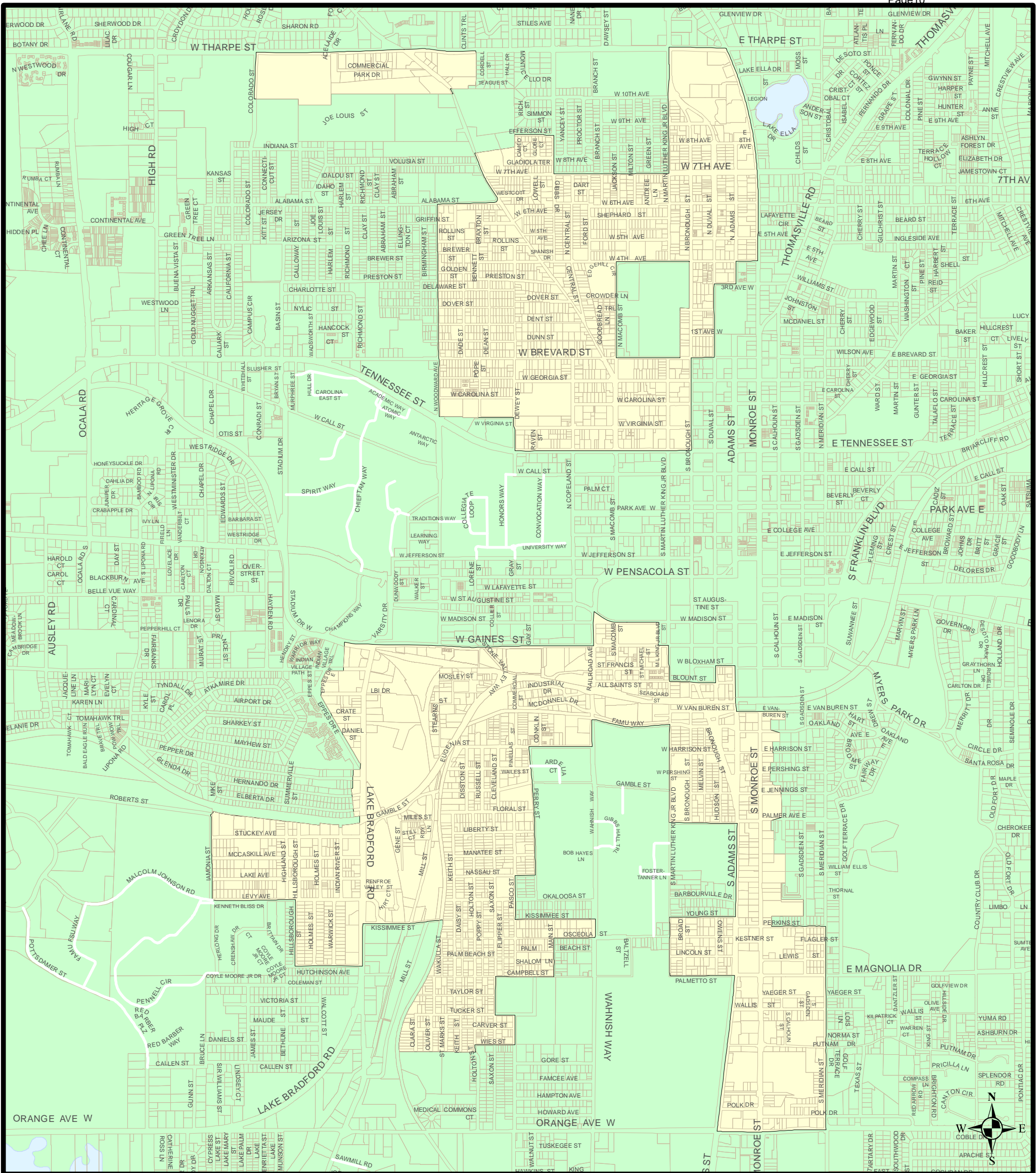
\_\_\_\_\_ **2 photos of current conditions of project site**

\_\_\_\_\_ **Signature of applicant's representative**

\_\_\_\_\_ **Detailed planting plan (for landscape projects)**

\_\_\_\_\_ **Maintenance program**

\_\_\_\_\_ **Map of project site**



# Greater Frenchtown / Southside Community Redevelopment Area

 Greater Frenchtown/Southside CRA

