Public Works Department Request Form (Exhibit C)

Attachment to the Community Activity Grant Application/SEP Process

Fiscal Year: ***2020-2021***

Date Application submitted: _____

SECTION 1 – GENERAL INFORMATION

Name of Applicant / Organization _____

Mailing Address: _____

Phone Number: _____

Contact: _____ _____

Name Phone Number

_____

E-mail address

Applicant Signature: _____ Title: _____

SECTION 2 – EVENT INFORMATION

Event Name: _____

Event Location: _____

Event Date: _____ Event Time: _____

Estimated Event Attendance Number: _____

SECTION 3 – PUBLIC WORKS SERVICES REQUESTED

Number of Public Works Staff Requested: _____

Equipment Rentals and Quantity Requested:

☐ Cones _____ ☐ Delineators _____ ☐ Street Closures _____ ☐ Signage _____

Dates Requested: _____ ***Times*** Requested: _____

Projected Staff Time Expense: $_____ Equipment Expense: $ _____

Additional Information: _____

_____

_____

TO BE COMPLETED BY PUBLIC WORKS DEPARTMENT

Reviewed by:

Signature: _____ Title: _____ Date _____

Total Cost for In-Kind Request: _____