TNT Project Number: Date Received:

Area:

TNT Special Projects Proposal

# Name: Email: Phone Number: Address:

**Circle One: Capital Project Public Art EVENT** (\*must complete additional event form)

# Project Name: Funds Requested:

Please describe your proposal for use of TNT project funds in the space below; include a budget and/or price quotes if possible. Please use the back or attach additional pages if necessary.

Does your project need any approvals? Circle all that apply. Attach supportive documents.

**Council DPW Parks Public Art Commission Other**

**\*Funds will not be dispersed until proper approval from the appropriate agency is granted.\***

**Expected Date of Completion:**

**Person Responsible for submitting updates & documentation:**

**Itemized Budget**

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| **Item** | **Amount** |
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