

AMY J. BODEK, AICP Director, Regional Planning DENNIS SLAVIN Chief Deputy Director, Regional Planning

# **COMMUNITY BENEFIT PROPOSAL REQUEST**

All fields must be filled out for the request to be deemed complete. Only complete requests will be considered.

#### **GENERAL INFORMATION**

REQUEST DATE:

REQUESTOR(S)/COMMUNITY GROUP:

COMMUNITY NAME:

RELATIONSHIP TO COMMUNITY:

#### **CONTACT INFORMATION**

EMAIL:

PHONE NUMBER:

MAILING ADDRESS:

**RESIDENCE ADDRESS:** 

#### **PROPOSAL INFORMATION**

DETAILED PROPOSAL DESCRIPTION & LOCATION:

HOW WILL THIS PROPOSAL BENEFIT THE COMMUNITY:

 DO OTHER COMMUNITY MEMBERS SUPPORT THIS PROPOSAL?

### **ADDITIONAL INFORMATION**

## PLEASE SUBMIT ANY OTHER SUPPORTING DOCUMENTATION FOR REQUEST AS AN ATTACHMENT.

#### For Internal Use Below\_\_\_\_\_

Does the request meet criteria of associated community fund?

 $\Box$  YES □ NO

Type of project proposal:

- □ Program
- □ Planning
- □ Capital Improvement\*
- □ Other

\*Capital improvement proposals will be referred to Public Works for their review and approval.

Application Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_