



City of Livonia

Neighborhood Grant Application

Name of Association/Group (min. 10 families/addresses) _____

Mailing Address _____

Contact Person _____ Position _____

Email _____

Daytime Phone _____

Secondary Contact _____ Position _____

Email _____

Daytime Phone _____

If you are not an established Neighborhood Association, please list families and addresses represented:

1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

Grant Funds Requested \$ _____

Geographic Area of Project/Event _____

Detailed Description of the Project/Event:

Describe how you will complete the Project/Event:

Detailed cost breakdown for materials to be purchased with Grant Funds:

Type/Category

Amount

_____	_____
_____	_____
_____	_____
_____	_____

In addition to the above information, please submit the following (where applicable):

- Letter-size landscaping plan (hand-drawn sketch is sufficient)
- Photograph(s) of the area
- Roster of Homeowners Association Membership and Officials
- Letters of Support
- Any other information or materials that would further explain/illustrate the planned Project/Event.

Please keep all receipts pertaining to the Project/Event and return them to Community Resources, City Hall by November 30, 2020.

All information provided is true and correct.

Signature of Representative

Date

For City of Livonia use only

Amount awarded _____

Approvals:

Parks and Recreation

Community Resources

Housing