

## **Application for Pop Up Art**

| ADDUCATION "                                       | OFFICE USE ONLY                                                                                                                                                                                                                                                                                                                        |
|----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| APPLICATION #:                                     | Approved by:                                                                                                                                                                                                                                                                                                                           |
| reviewed by the Public                             |                                                                                                                                                                                                                                                                                                                                        |
|                                                    | GENERAL INFORMATION                                                                                                                                                                                                                                                                                                                    |
| Commercial Historic District                       | Residential Historic District Is this a retroactive request? Yes INO                                                                                                                                                                                                                                                                   |
| Is this application filed in resp                  | oonse to a Notice of Violation from the Code Enforcement Department? Yes 🔲 No 📋                                                                                                                                                                                                                                                        |
| Proposed improvements will a                       | ffect the following elevations: North South East West                                                                                                                                                                                                                                                                                  |
| Property Address:                                  |                                                                                                                                                                                                                                                                                                                                        |
|                                                    | PROPERTY OWNER INFORMATION                                                                                                                                                                                                                                                                                                             |
|                                                    | Signature:                                                                                                                                                                                                                                                                                                                             |
| Mailing Address:                                   |                                                                                                                                                                                                                                                                                                                                        |
| Phone:                                             | Email:                                                                                                                                                                                                                                                                                                                                 |
|                                                    | APPLICANT/AGENT INFORMATION                                                                                                                                                                                                                                                                                                            |
|                                                    | Signature:                                                                                                                                                                                                                                                                                                                             |
| DI                                                 | Email:                                                                                                                                                                                                                                                                                                                                 |
| rnone.                                             | Email:                                                                                                                                                                                                                                                                                                                                 |
| BELOW. YOU MUST CONTACT OBTAIN A BUILDING PERMIT M | NOWLEDGE THAT A BUILDING PERMIT MAY BE REQUIRED FOR THE SCOPE OF WORK LISTED THE BUILDING DEPARTMENT TO DETERMINE IF A BUILDING PERMIT IS REQUIRED. FAILURE TO AY RESULT IN A STOP WORK ORDER, DOUBLE PERMIT FEES, AND POTENTIAL FINES. BY SIGNING EDGE THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND ACCURATE TO GE. |
| Signature:                                         | Date:                                                                                                                                                                                                                                                                                                                                  |
| Check if you would like to rece                    | eive emails regarding Public Art and Community Planning within your community.                                                                                                                                                                                                                                                         |
|                                                    | DESCRIPTION OF PROPOSED ART                                                                                                                                                                                                                                                                                                            |
| Completely describe the entire                     | escope of work, including proposed location, type of art, and medium to be used.                                                                                                                                                                                                                                                       |
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| SUPPLEMENTAL INFORMATION                                                                                                                                                                           |  |
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| Artist Name:                                                                                                                                                                                       |  |
| Title of Artwork:                                                                                                                                                                                  |  |
| Description of Artwork:                                                                                                                                                                            |  |
| Completely describe the entire scope of work, including changes in material and color, methods that will be used to accomplish the proposed work. For large projects an itemized list is required. |  |
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## **Required Supplemental Information**

- 11"x17" full color sketch of the proposed artwork.
- Artist's resume and portfolio which reflect at least three completed artworks.
- Copy of lien search results from Orange Lien Data (see attached Lien/Fine Inquiry)

ONLY WORK SPECIFICALLY INDICATED ABOVE IS PERMITTED. ANY CHANGES TO THE BUILDING NOT LISTED ABOVE ARE NOT PERMITTED AND REQUIRE AN ADDITIONAL APPLICATION FOR POP UP ART.