



ADOPT-A-LOT PROGRAM APPLICATION

Contact Information

Name(s) of Applicant: _____

Applicant Type: Individual/Family Business Neighborhood Assoc.
 Non-Profit Religious Institution University Affiliated Group
 Other(please explain): _____

Applicant's Address: _____

City, State, ZIP: _____

Daytime Phone: _____ E-mail: _____

Property Information

Property Address and/or Parcel ID number: _____

Describe the current condition of the property: _____

Specifically describe your plans for this lot once you adopt it: _____

Certification

The information provided in this application is true to the best of my knowledge. I understand that the Redevelopment Authority will review this request and determine if it is in compliance with Authority policies and procedures and existing neighborhood plans. I understand that this form is a statement of interest only and by its submission, neither the Applicant nor the Redevelopment Authority commit to entering into a lease agreement.

Signature: _____ Date: _____