

CITY OF NEWCASTLE PROJECT PROPOSAL FORM

The name of your organization: _____

Name of member in your organization (if other than yourself) serving as the primary contact

NAME: _____

ADDRESS: _____

DAYTIME PHONE: _____

CELL PHONE: _____

ADDRESS: _____

With this form, please include the following information for your planned project

Location:

Removal of existing facilities:

Building and Foundation plans:

Dimensions (height, width, length):

Excavation proposed:

Materials to be used:

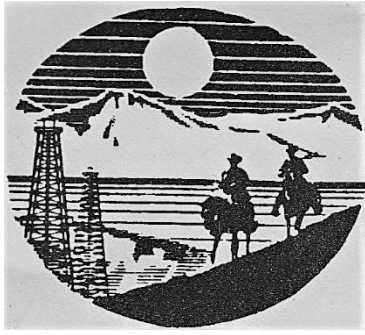
Proposal for water and sewer:

Plan for removal of waste material:

Estimated cost and funding source:

Who is to maintain the facilities after the project is complete:

A brief history of the organization and a history of maintenance:



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Organization representative signature: _____ Date: _____

Print Name: _____

Approval of Project Proposal (office use only)

City Engineer: _____ Date: _____

Council representative: _____ Date: _____

Public Works Representative: _____ Date: _____

Parks Management: _____ Date: _____