

CITY OF ASHLAND

Public Art Commission

Mural Application

Applicant

Applicant Name:

Applicant phone and email:

Applicant Address Line 1:

City: State: Zip:

Lead Artist (City contracts with)

Artist Name:

Artist name and email:

Artist's Address Line 1:

Artist's Mailing Address (if different):

City: State: Zip:

Artist website:

Proposed Mural Building

Name of Property Owner of proposed mural Building (if different from applicant):

Owner phone and email:

Proposed Mural Building Street Address:

Property Owner mailing address:

City: State: Zip:

Dimensions of proposed mural wall:

Has the owner given permission for a mural to be painted on the proposed wall?

The wall is:

brick cinderblock stucco wood other

Describe the ground in front of the wall (condition, debris etc.)

Sponsoring Person/Organization (person responsible for mural costs and deposit)

Sponsoring Name:

Sponsoring phone and email:

Sponsoring Mailing Address:

City: State: Zip:

Please describe the project, the specific location of the mural and why a mural will enhance the area.

Can the wall be seen from the public right of way (e.g. sidewalk, alley, street etc.)?

Have you selected a professional mural artist?

Describe the theme/image you envision for this mural if known at this time.

Why do you want a mural at this location? How will the mural benefit the neighborhood?
Community?

What funding do you have for the project?