

## **Retroactive Mural Registry Application**

## RETROACTIVE MURAL INFORMATION

Mural Title:	
Artist(s) Name:	
Dimensions:	Anticipated Lifespan:
What the Artist Was Paid:	Year Completed:
Building Address Where Mural Is:	
Title of Business or Building Where Mural Is:	
Media: Paint □ Tile □	S
If "Other" please describe:	
Mural Description (250 word Artist Statement	t):
APPLICATION CHECKLIST:	
$\hfill \square$ Submit final rendering of mural design or	photograph of mural
☐ Complete this 'Mural Information' Form	
Was the mural executed in accordance with t	he City's permitting process?
Yes □ Uncertain □ No □	
If yes, please provide the approval case number: _	
Please Note: The Mural Registry will be vetted by	the City. An application submission does not guarantee that

the mural will be added to the registry.

For more information or to submit your application, please contact the Public Art Program Manager.