

Exhibit A

APPLICATION FORM (by U.S. Mail and Town Web site)

**NOTICE:** Deadline for this application is **JULY 1 st!!!**

1. **ALL** projects must be within the public right-of-way, or public property with in the contiguous municipal boundaries of the Town of Pine Level.
2. Any party utilizing these funds for projects will **be responsible** for property damages, misfeasance and misappropriation of funds and /or property and shall not hold the Town of Pine Level liable for such actions.
3. If the recipient of the fund is someone other than the Town of Pine Level, that individual or group will be responsible for the **maintenance** of the project upon completion. This includes regular pruning, watering, and other necessary actions to maintain the project in its original condition.

**This application must be accompanied by:**

1. A sketch plan which illustrates the nature of your request.
2. A cost estimate of the project.
3. A list of planting materials and other materials that will be used in accomplishing the project. Please list live plant types, their size, shape and color.
4. The addresses of all property involved in the proposed project(s). Have the effected property owners been contacted and made aware of the project.  Yes  No
5. Type of Grant requested:  Direct Grant;  Reimbursement;  Matching Funds
6. Do you propose to attach items to Utility Poles?  Yes  No
7. If yes to item 6, have you gotten written permission from the appropriate Utility?  
 Yes  No

If yes, please attach a copy of the Joint Use Pole Agreement granting permission to attach to the Utility poles(s). The contact person for the local utilities are as follows:

Town of Pine Level--Director of Utilities 919-965-  
Embarq Telephone---Local Engineer 919-938-3943  
Progress Energy-----Local Engineer 919-965-1541

\_\_\_\_\_  
Signature of Applicant\ Contact person

\_\_\_\_\_  
Date

Telephone Number \_\_\_\_\_

E-Mail address \_\_\_\_\_

Exhibit A (Continued)

**TO BE COMPLETED BY THE TOWN OF PINE LEVEL**

Date received by the Town and / or Appearance Commission \_\_\_\_\_,

Request Number \_\_\_\_\_,

Approved \_\_\_\_\_; Denied \_\_\_\_\_; Needs more information \_\_\_\_\_

Comments:

\_\_\_\_\_  
Chairperson or Secretary  
Appearance Commission  
OR  
Mayor

\_\_\_\_\_  
Date