



## SIGN TOPPER APPLICATION

City of Carrollton  
Neighborhood Partnership Office  
1945 E. Jackson Rd.  
Carrollton, TX 75006

Each application is determined on a case by case approach. Nothing herein shall imply or suggest that the City of Carrollton is precluded from considering other options which would further the best interests of the City. This is a matching grant program based on an agreement providing performance conditions. An explanation of each section of the application is provided. Applicants should answer each section and give as much information as possible.

### APPLICANT INFORMATION

*Applicants can be any neighborhood organization within city limits; however they must be registered with the City through the Neighborhood Partnership Office. Qualified neighborhoods need to be at least 10 years old and include a minimum of 30 residential units.*

Organization Name: \_\_\_\_\_

Registered with the Neighborhood Partnership Office:                      Yes                      No

Estimated number of households benefiting from this grant: \_\_\_\_\_ Age of neighborhood: \_\_\_\_\_

Principal Applicant's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

Primary Project Coordinator's Name: \_\_\_\_\_

Primary Project Coordinator's Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

**I. Provide a complete project description. (four-part question)**

A. Describe the project in detail.

B. How many TOTAL streets sign does your Homeowner's Association (HOA)/Neighborhood Association (NA) currently have? *(Not all street signs have to have a sign topper. Your neighborhood might want to consider placing sign toppers at the entrances or edges of the neighborhood only)*

C. Please specify the number of sign toppers requested? *(Include 2 – 3 additional replacement signs to be stored at the City of Carrollton in case sign toppers are damaged or stolen)*

D. Please specify the locations where the sign toppers will be installed? *(Please list all intersections and attach a map with locations identified please note some intersections have two street signs)*

**II. The Neighborhood Sign Topper Program is design to promote neighborhood identity and cohesion. Not all neighborhood sign toppers have to look alike. Describe the design of your Neighborhood Sign Topper, and how your neighborhood determined to use this design. How does the design help promote neighborhood identity?** *(What sign design are you using? What sign color? Do you have a logo? Will you put the established date of your neighborhood on your sign? How did your neighborhood come to this decision? Please attach final sign design mock up for review).*

**III. Neighborhood Support.** *(Does this grant identify a need or problem your neighborhood as a whole has recognized as important? How many people have been informed? How have they*

*been informed? How many people will be involved? Have any and all potential conflicts about the project been mitigated?)*

**A. What percentage of your neighborhood is in support of this project? How many households in your neighborhood that have been informed/notified about this project? How many households have responded in support of the project?**

Total Number of households in neighborhood: \_\_\_\_\_

Number of households notified about project: \_\_\_\_\_

Number of households indicating support of project: \_\_\_\_\_

Percentage of neighborhood support (*households in support/total households x 100*): \_\_\_\_\_

How many households have not been informed about this project? \_\_\_\_\_

Percentage of uninformed households (*uninformed households/total households x 100*): \_\_\_\_\_

**B. How did you involve your neighborhood designing the sign?** (*Please list activities implemented to solicit neighborhood input on the sign design (i.e. list any meetings, surveys/polls conducted, posts to your web page, nextdoor or facebook, petitions signed, or newsletters, e-mails etc. utilized to gather resident input. )*)

**C. Are there any neighbors who have expressed concerns or opposition to the sign topper project? If so, have they been given an opportunity to present their concerns to the neighborhood organization as a part of the planning process?** (*Has the neighborhood tried to mitigate any conflict and include expressed concerns into the design of the project? Please explain how your neighborhood organization has addressed any concerns about the project.*)

IV. **PROJECT BUDGET** (Please provide a breakdown of the estimated project expenditures by task or item.)

**A. Total Project Cost**

| <b>Item</b>   | <b>\$ Amount</b> |
|---|------------------|
| Total number of signs requested                             |                  |
| Price per sign  | \$               |
| A. Cost of Materials (# of signs x price per sign) =        | \$               |
| B. Misc. Costs (set up fee, delivery)                       |                  |
| <b>C. Total Cost Estimate</b> (Enter this amount on page 4) | <b>\$</b>        |

**B. Sweat Equity**

To calculate the value of sweat equity, *list*: 1) each task that will be performed by volunteer labor (such as application preparation and reporting time); 2) the number of people participating; and 3) the hours estimated to perform the task, then, for each task, *multiply*: 1) the number of people performing the sweat equity; 2) the total number of hours estimated to complete the task; and 3) the rate of \$10 per hour. Finally, find the total sum of the "\$ Value of Sweat Equity" column. You will insert this total on page 4.

| <b>Task</b>                        | <b>Number of People Participating</b> | <b>Number of Hours</b> | <b>Hourly Rate</b> | <b>\$ Value of Sweat Equity</b> |
|------------------------------------|---------------------------------------|------------------------|--------------------|---------------------------------|
|                                    |                                       |                        | \$15.00            | \$                              |
|                                    |                                       |                        | \$15.00            | \$                              |
|                                    |                                       |                        | \$15.00            | \$                              |
|                                    |                                       |                        | \$15.00            | \$                              |
|                                    |                                       |                        | \$15.00            | \$                              |
|                                    |                                       |                        | \$15.00            | \$                              |
|                                    |                                       |                        | \$15.00            | \$                              |
| <b>Total Value of Sweat Equity</b> |                                       |                        |                    | <b>\$</b>                       |

**C. Neighborhood Monetary Contribution**

Please provide the amount of sweat equity from above cash donations received for project:

|  |           |
|--|-----------|
| <b>Neighborhood Portion of Grant (1/3 of total project cost estimate (total cost x .3333))</b> | <b>\$</b> |
| Subtract Total Value of Sweat Equity (above)   | -\$       |
| Subtract total value of upfront cash donations   | \$        |
|  | \$        |
|  | \$        |
| <b>Total neighborhood Monetary Contribution</b> (Enter this amount in the table below)         | <b>\$</b> |

**D. FINAL BUDGET CALCULATION**

To complete your final project cost estimate, you will need to subtract the Neighborhood Monetary Contribution (1/3 of total project cost – sweat equity) from the calculated cost of the project as determined on pages 3:

| <b>Budget Item</b>  | <b>\$ Amount</b> |
|---|------------------|
| Total Estimated Cost of Project (IV. A, Pg 4)                   | \$               |
| Subtract Total Neighborhood Monetary Contribution (IV. C, Pg 4) | - \$             |
|   | \$               |
|   | \$               |
| <b>Total Grant Requested (\$5,000.00 maximum)</b>               | <b>\$</b>        |

## FINAL CHECKLIST

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Before you submit your application for consideration, have you . . .

- Registered your neighborhood with the City of Carrollton Community Development - Neighborhood Partnership Office?
  
- Discussed your proposal with Neighborhood Partnership Office Staff prior to application deadline to identify any technical issues associated with your grant proposal?
  
- Met with your neighbors to discuss the project and gauge neighborhood support?
  
- Fully completed the application, including the submission of attachments (i.e. photographs of the project site, landscaping plans, sketches of the proposed project, detailed budget etc.) you feel are necessary for your neighborhood project? (*NOTE: At least one graphical rendering or plan must be submitted with your proposal.*)
  
- Conducted at least one meeting or survey of your neighborhood to determine the support of the project? If so, have you attached proof of neighborhood support?
  
- Submitted signed letters/petitions of support from all neighbors *directly* impacted by the proposed project?

Primary Project Coordinator: \_\_\_\_\_  
Signature Date

Secondary Project Coordinator: \_\_\_\_\_  
Signature Date

**If you answered “no” to any of the above questions, your application is not complete and cannot be processed.**

**If you answered “yes” to all of the above questions, your application is complete and will be processed upon receipt. Thank you for all of your hard work!**