



Retroactive Mural Registry Application

RETROACTIVE MURAL INFORMATION

Mural Title: _____

Artist(s) Name: _____

Dimensions: _____ Project Budget: _____

Anticipated Lifespan: _____ Mural Address: _____

Media: _____

Paint Tile Digital Other

If "Other" please describe: _____

Mural Description (250 word Artist Statement):

APPLICATION CHECKLIST:

Final rendering of mural design

Complete 'Mural Information'

Was the mural executed in accordance with the City's permitting process? Yes 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.