VILLAGE OF INNSBROOK NEIGHBORHOOD IMPROVEMENT PROGRAM (NIP) APPLICATION



DATE: _____

Village Use Only:

Application Rec'd Date:_____

Trustees Mtg Date: _____

App. ____ Approved ____ Reject Comments:

Please complete the entire application and have your representative sign below.CorThe information is needed to determine your eligibility for the Village ofInnsbrook's Neighborhood Improvement (NIP) Program. Applications will beProcessed on a first-come, first-serve basis. If assistance is needed, contact theVillage Administrator at 636-745-8844.Village Administrator at 636-745-8844.Village Administrator at 636-745-8844.

APPLICANT INFORMATION:

Please indicate the name of the Neighborhood Association and the name of the Chair, President, or Director of the Neighborhood Association and a contact person (if different). The contact person should be able to answer specific questions regarding your project and application. Please note that if this project is approved, the approved funds will be mailed to this contact at this address.

Name of Neighborhood Association :				
Name of Contact as listed above:				
City/State/Zip:	Phone:			
If not an recorded Neighborhood Association individuals (non-familial) that are applying	· •	names and addresses of three or more		
NAME:	Address:			
NAME:	Address:			
NAME:	Address:			
President/Chairperson (if applicable):				
Address: (Numerics and Street)	City	State Zipcode		
Daytime Phone Number:	Evening Phone Number:			
Email:				
PROJECT SUMMARY: Please indicate name of the project and person authorized by the organization, su sign the application. Name and Short Description of the Pro	uch as President, Chairperso	d or physical location of the project. A on, Vice-Chairperson, Director, etc. must		
Neighborhood and/or Physical Location o	of the Project:			
Total Project Cost:	Amount Requested from NIP:			
Estimated Project Start Date:	Estimated Project Completion Date:			
Has your Neighborhood Association appl If yes, please indicate when and the name	Ŭ.	ISIY: YES NO		
Signature of Authorized Representative	Printed Name (&?	Fitle) of Authorized Representative		

Please provide a response to the following questions. Attach additional sheets if necessary.

PLEASE PROVIDE A DETAILED DESCRIPTION OF THE PROJECT

BRIEF DESCRITION OF NEIGHBORHOOD ASSOCIATION OR GROUP OF THREE OR MORE INDIVIDUALS

DESCRIBE WHAT NEED THIS PROJECT ADDRESSES AS A PUBLIC PURPOSED AND HOW THE NEIGHBORHOOD WILL BENEFIT FROM THE PROJECT.

FUTURE MAINTENANCE OF THE PROJECT - If the proposed project is for a neighborhood sign or landscaping/beautification project please describe how the project be maintained once the project is completed.

	BU	DGET WORKSHEET	
Provide a total picture o	f your project expens	es itemizing materials and labor costs	s. Since public funds are being
expended for the Neighb	orhood Improvement	Project prevailing wages apply. Consu	Ilt with Village Administrator on
current prevailing wage o	order.		
Materials & Labor	Cost	Copy of three bids	Documentation

Prevailing Wage No. _____ provided by Village Administrator)

NEIGHBORHOOD IMPROVEMENT PROGRAM GUIDELINES

The Neighborhood Improvement Program (NIP) was adopted by the Board of Trustees of the Village of Innsbrook as Ordinance No. 169. The intent of the NIP is to encourage civic pride, neighborhood safety, environmental sustainability, enhancement and beautification of neighborhoods and promote the interests of the Village of Innsbrook. In order to receive funding from the Village of Innsbrook the project must meet the following minimum guidelines:

1. The project application shall be submitted to the Village Administrator prior to beginning project. All projects must comply with prevailing wage laws.

2. Said application shall be reviewed by the Board of Trustees of the Village of Innsbrook. The Board of Trustees has the right to deny a portion of said application and shall make the final decision for approval of disapproval of application.

3. The project shall meet all Village Codes and applicant must obtain all building permits, if applicable.

4. Project must be completed within six months of approval.

5. Grant cycle shall be annually from July 1 - June 30. Applications received after May 20th shall be considered for the following annual grant cycle. If applicant submits additional applications during a grant cycle, these applications shall be held and, if funds are still available, considered at the end of the cycle unless the new request demonstrates a critical safety need.

6. It shall be at the discretion of the Board of Trustees to annually at budget time to; A) fund the Neighborhood Improvement Program and; B) set a maximum amount per application and/or total improvement amount.

7. Upon approval of application and completion of proposed work applicant shall provide; A) proof of three bids obtained for materials and work performed; B) paid invoices for materials and work performed and; C) inspection of Village official and approval that work was completed as approved in said application.

8. The Village of Innsbrook shall be held harmless from any activities of the Neighborhood Association who shall comply with all federal, state and local laws.

Please send complete application to:	Any questions can be directed to:		
Carla Ayala	Village Administrator, Carla Ayala		
Village Administrator	Email:	innsbrookcity@centurytel.net	
1835 Highway F	Village Phone:	636-745-8844	
Innsbrook, MO 63390	Village Fax:	636-745-7755	