

Neighborhood Organization

Community Grant Application

Please Note: All grant requests must be sponsored by one or more Twin Palms residents

Date (type here)	
Name of Residents(s) Submitting Request (type below)	Primary Resident Contact Information Name, Address, Phone, Email (type below)
Name and Purpose of Entity to Receive Grant (type below)	
Amount of Funding Requested (type below)	Timeframe for Expenditure of Grant Funds (type below)
Purpose of Grant Fund Request (type below)	
How does this grant address one or more of Twin Palms' funding priorities? (type below)	
How will the funds be used? (If appropriate, attach itemized budget, bids, etc.) (type below)	
How will the grantee work collaboratively with us to publicize the grant? (type below)	
Who is responsible for assuring funds are spent in a timely manner for requested purpose? Name, Address, Phone, Email (type below)	
Other Comments? (type below)	