



COMMUNITY PROJECT ACCOUNT
(Small, De Minimus Public Projects)

APPLICATION

1) Name of Project: Slater Marietta Fire Dept. - Signs

Check Project Type:

Nonrecurring community requests for infrastructure:

Flooding

Roads

Lights

Sewer and drainage

Public buildings and grounds

Community Centers open to residents of Greenville County

Infrastructure related studies

Contractual agreements for social, recreational, and educational programs

Contributions to local governments in Greenville County for community projects

2) Amount of Funds Requested: \$ 1,000

3) Project Sponsor

Organization: Slater Marietta Fire Department

Mailing Address: 3001 Geer Highway

Marietta SC 29661

4) Contact Person:

Name Marion Cruell Title Chief

Telephone (864) 836-3143 Alt. Telephone No. _____

Email slatermarietta@bellsouth.net Fax No. 836-3142

Council Representative(s) Joe Dill

5) Project Timeline ~ Beginning: April 1, 2017 Ending: June 30, 2017
MONTH/DAY/YEAR MONTH/DAY/YEAR

6) Date Funds are Needed: _____

7) Location of Project: Slater-Marietta Community

8) Project Description: (Attach additional pages if necessary)

a. General Description: Installation of Welcome signs throughout the community

b. Benefit project will provide the Community:
Will provide a warm and inviting welcome to those who travel through and live in the community

c. Additional Comments: The Committee has obtained funding from multiple sources.

9) Project Budget:

a. Total Project Budget including all sources of funds: \$ \$57,000

b. Percent request equals of the total Project Budget? _____

List below all funding sources for this project:

Funding Source	Amount
Community Project Account	1,000
TOTAL:	1,000

Joe Dill
Signed

March 8, 2017
Date

Council Member – District 17
Title