

COMMUNITY PROJECT ACCOUNT (Small, De Minimus Public Projects)

APPLICATION

1) Name of Project: <u>Parking – Heritage Green (Music Museum)</u> 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
- X Contractual agreements for social, recreational, and educational programs
- □ Contributions to local governments in Greenville County for community projects

2) Amount of Funds Requested: \$5,000_

3) Project Sponsor Organization:		ory Museum			
Mailing Address: 540 Buncombe Street					
	Greenville, SC 29601				
4) Contact Person:					
Name	Ellen Hawkins		Title <u>C</u>	00	
Telephone <u>864-467-3100</u>		Alt. Telephone No			
Email_ellen@upcountryhistory.org			Fax No		
Council Repr	resentative(s) _	_Joe Dill			
5) Project Timeline	e ~ Beginning:_	7/1/19 MONTH/DAY/YEAR	U	6/30/20 ONTH/DAY/YEAR	

6) Date Funds are Needed: June 30, 2019

7) Location of Project: 540 Buncombe Street

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

- a. General Description: <u>Free Use of Parking by the Carolina Music Museum</u> Patrons in the Upcountry History Museum Lot
- b. Benefit project will provide the Community:

Provides parking for visitors to Museum_____

c. Additional Comments: _____

9) Project Budget:

- a. Total Project Budget including all sources of funds: <u>\$ 5,000</u>____
- b. Percent request equals of the total Project Budget? _____

List below all funding sources for this project:

Funding Source		Amount
Community Project Funds – Mr. Dill		\$5,000
	TOTAL:	\$5,000
		-

Joe Dill_____ Signed <u>5/17/19</u> Date

<u>Councilor</u>____ Title