



**ATTACHMENT A:  
APPLICATION FOR NEIGHBORHOOD PARTICIPATION IN BALTIMORE CITY  
PARKLET & PEDESTRIAN PLAZA PROGRAM TECHNICAL ASSISTANCE**

**Pre-Application Meeting:**

Prior to submission of this application, please contact DOT Planning at 410-396-6856 to schedule a pre-application meeting.

Applications to this program must include:

1. Completed application (this form).
2. Three (3) letters of community support from community members, business owners, landlords, or similar stakeholders in order to demonstrate your commitment to, and support from, the neighborhood.
3. Proposed Design of Parklet or Pedestrian Plaza
4. Application Fee :

If the Application has been approved the following documents must then be submitted:

1. Parklet Permit
2. Maintenance Agreement/ Memorandum of Understanding (MOU)
3. Certificate of Good Standing with Department of Assessment and Taxation
4. Proof of Insurance/Liability

**Application documents are due to:**

City of Baltimore  
Attn: Betty Smoot, City Planner  
Transportation Planning Department of Transportation,  
417 E. Fayette Street, Room 747  
Baltimore, MD 21202.

DATE

**1. Name of Sponsoring Organization**

**2. Name of Main Contact Person within Sponsoring Organization**

**3. Address of Sponsoring Organization**

**4. Email Address**

**5. Telephone Number**

**5. Location of Parklet or Pedestrian Plaza.**

**6. List all Neighborhood and Community Associations near this Location.**

**7. Statement of Intent: Your statement should include a vision statement; description of the neighborhood; description of need, and a brief description of existing businesses/vacancies in the area.**



**PARKLET & PEDESTRIAN PLAZA PROGRAM APPLICATION (8-11)**

**8. STATEMENT OF NEIGHBORHOOD COMMITMENT**

Please submit a statement that outlines your commitment to the neighborhood and vicinity of the Parklet or Pedestrian Plaza.

**9. How long have you (or your organization) been active in the community?**

**10. Do you (or any of your team members) hold any offices in community organizations, merchants' or civic associations, etc.?**

Yes

No

**11. If yes, please list what office(s) you/your team members hold in which associations(s):**



**PARKLET & PEDESTRIAN PROGRAM APPLICATION (12-13)**

**12. Please select all of the issues that you believe the neighborhood encounters:**

<input type="checkbox"/>	Lack of coordinated management / oversight
<input type="checkbox"/>	Poor quality of retail
<input type="checkbox"/>	Poor quality of food
<input type="checkbox"/>	Poor quality of tenants
<input type="checkbox"/>	real or perceived safety concerns
<input type="checkbox"/>	too many office, church, non-profit store fronts
<input type="checkbox"/>	problems with maintenance, litter, graffiti, etc.
<input type="checkbox"/>	no daytime population
<input type="checkbox"/>	no evening or weekend population
<input type="checkbox"/>	nowhere to park
<input type="checkbox"/>	bike travel difficulties
<input type="checkbox"/>	difficult pedestrian environment
<input type="checkbox"/>	transit travel difficulties
Other, please specify:	

**13. Please include any additional information about your neighborhoods Parklet & Pedestrian Plaza that should be shared in consideration of your application.**