



NEIGHBORHOOD INVESTMENT PROGRAM Capital Project Manager Approval Form

To be completed by the Neighborhood Association:

Neighborhood Association:

Name of Project:

Total Funding Request:

Brief Project Description:

To be completed by the Project Manager:

Project Manager Name:

Funding Recommended for Project:

I have reviewed and approved the following for this project:

YES NO N/A

Project Plan & Design

Sustainability & Long-Term Maintenance Plan

Detailed Project Budget

Approvals required from other agencies/stakeholders

My signature below serves as formal approval for this project.

Date of Approval:

Signature: