

Name of Artist(s):	
Type of Artwork:	
Title of Artwork:	

This form is to be used by those seeking to donate artwork to the city for display in a public area. **NOTE:** There is a 30-day notice for public comment before recommendation from the Public Arts Commission.

- 1. Attach a copy or rendering of the artwork, and a photograph, video, drawing, model, or other representation of the artwork.
- 2. Attach the proposed location of the artwork, and a photograph, video, drawing, or other representation of the area immediately surrounding where the artwork would be placed.
- 3. Describe the materials comprising the artwork, dimensions, approximate weight, finish, color, and any special treatments or protective coatings applied to the artwork.

4. Describe the method for mounting or displaying the artwork. Include a description of the materials and appearance of the base, fixtures or other visible physical features displaying the art.



5. Describe the anticipated life of the artwork in the proposed location.

6. Describe how the artwork might change appearance over time.

7. Describe the methods and techniques to maintain the artwork. Include a maintenance plan, estimated costs of maintenance, and how maintenance will be funded.

8. Please specify that no rights will be retained by the artist(s) with respect to the artwork.

Artist Initials \_\_\_\_\_ Artist Initials \_\_\_\_\_ Artist Initials \_\_\_\_\_

Or, specify rights that will be retained by the artist(s) with respect to artwork and future removal of the artwork from the designated public area proposed to display the artwork.



9. Describe any proposed assistance sought from the city, other public agencies or donors in connection with the fabrication, development, installation, and maintenance of the artwork.

10.	<b>Property Owner Consent.</b> Consent of any artwork on private property as part of a pudisplay will occur.	property owner who intends to display Iblic art program and terms under which the
Name	e of Business	Address
Prop	erty Owner Signature	Date
11.		ich, in the estimation of the City Attorney and al and other interests of the city in connection
Artis	t Signature	Date
Artis	t Signature	Date
Dono	or Signature	Date



Submitted By:		
Address:		
Phone:		
Signature:	Date:	

Return Completed Form To: City of Vista, Recreation & Community Services Department Attn: Public Arts Staff Liaison 200 Civic Center Drive Vista, CA 92084 <u>Or Email To</u> vistapublicart@cityofvista.com

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or questions. Artwork being proposed to be placed within the confines of Historic Downtown Vista must provide evidence of The Chamber is located at 127 Main Street, Vista, CA 92084, and can be artwork to those businesses affected by the artwork and work through any concerns the affected businesses may have. In AFFECTED BUSINESSES within the artwork location. Applicants/Artists are expected to fully communicate the details of their addition, the name and phone number of the public art contact will be provided to each business so as to address any concerns and/ Before final approval of your artwork can be granted, it is required that you notify and obtain written documentation from ALL contact with Vista Chamber of Commerce. contacted by phone at (760) 726-1122.

Please use the attached sheet to obtain the necessary documentation and return to: City of Vista, attn: Public Arts Liaison, 200 Civic Center Drive, Vista, CA 92084, e-mail: vistapublicart@cityofvista.com, phone: (760) 639-6151.

## Art Type:

Artist:

Artwork Title:

Additional Comments					
Date Signed					
Approval (Yes/No)					
Signature					
Contact Name (print)					
Phone #					
Address					
Business Name					

	Additional Comments									
Artwork Title:	Date Signed									
	Approval (Yes/No)									
	Signature									
	Contact Name (print)									
	Phone #									
Artist:	Address									
Art Type:	Business Name									