**PROVIEW AGENDA APPLICATION**

SEND APPLICATION TO: Aisling Quinn-Fleming, Box 20

Aisling.Quinn-Fleming@seattle.gov

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| --- | --- | --- |
| **1-A. Name of Project** |  | **1-B. Activity (WC or WP) Number:** |
|            |        |
| **2. Sector** |  |  |
| [ ]  1-Southwest [ ]  2-Southeast [ ]  3-Central East [ ]  4&5-Northeast [ ]  6-Northwest [ ]  7-Central West  |
| **3-A. Presenter Name** |  | **3-B. Phone Number** |
|       |       |
| **4. Length of Time Needed for Presentation**  | **5-A. ProView Date Requested** | **5-B. Date of Prior Presentation** |
|       |       |       |
| **6. Type of Presentation** |  |  |
| [ ]  Review Design Program w/PIP [ ]  Review Schematic Design [ ]  Other       [ ]  Review PIP Only [ ]  Review Design Development |
| 7. [ ]  O&M Costs have been reviewed by Facilities Maintenance and Operations before coming to ProView. (This is required before coming to ProView.) |
| **ADDITIONAL ATTENDEES** (It is the responsibility of the Planner/Project Manager to ensure attendance of key Parks and Recreation Department staff, i.e., Manager, Crew Chief, Property Management, etc.) |
| **NAME** | **CONNECTION TO PROJECT** | **E-MAIL ADDRESS** |
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| **PROJECT AGENDA ITEM SUMMARY INFORMATION** |
| **8. Fund Source / Program:** | **9-A. Current Appropriated Funding** | **9-B. CCA Amount:** |
|       |       |       |
| **10. Land Ownership of Proposed Project:** |
|       |
| **11. Brief Project Description (include CIP or Levy project description):** |
|       |
| **12. Key Issues to be Resolved:** |
|       |
| **13. Classification Policy Category:**  |
| **14. Indicate Any of the Following That Apply:** |
| [ ]  Landmark Designation [ ]  Olmsted Park [ ]  Master Plan [ ]  Property Issues (specify):       [ ]  Environmental Issues/Checklist (specify):        |
| **15-A. Project Maintenance & Operations Costs**  | **15-B. Have annual new facility costs been reviewed with Parks & Recreation Manager?** [ ]  Yes [ ]  No | **15-C. Maintenance & Utility Impact Report required?**[ ]  Yes [ ]  No |
|       |