PUBLIC DESIGN COMMISSION OF THE CITY OF NEW YORK

APPLICAT	ION FORM
	CERTIFICATE
	FILE
	EXHIBIT
Please do not write a	above this line.
THE DESIGN COMMISSION reviews permanent (define private, as well as works of art that are proposed on or of leased by the City to another entity. All projects must be and all submission materials must be submitted on the discount Commission advisory report, if applicable. Incomplete are design proposal—whether art, architecture and bridges, general and specific submission requirements. Additional and a Calendar of Meetings, including Submission Dead www.nyc.gov/designcommission.	ver City-owned property, including property that is listed on the transmittal of the appropriate agency(ies) leadline and include a Landmarks Preservation ad/or late submissions will not be calendared. Each landscape architecture or streetscape design—has al information may be requested. Submission Guideline
CHECK THE CATEGORY THAT BEST DESCRIBED Work of art: Percent for Art Work of art: Gift Work of art: Relocation and/or Conservation Architecture and Bridges Landscape Architecture	Streetscape: DistinctiveSidewalk and/or Light Fixtures
Please attach a brief statement that describes the p	
CITY COUNCIL DISTRICT #: COM	
Date(s) of Community Board review(s):	
Please attach the Community Board(s) resolution(s	
ESTIMATED PROJECT COST:	
CHECK THE DESIGN COMMISSION ACTION RE Courtesy Review Advisory Review Conceptual Review	

APPLICATION FORM

	R ART:	Please indicate whether this project has an associated Percent for Art
component. Yes	No 🗆	N/A (the primary application is a Percent for Art project)
	t compor	architecture and bridges, landscape architecture and streetscape projects, the ent should be submitted for conceptual review when the project is submitted
	docume	f new trees: Total number of tree removals: tation of Division of Forestry, Horticulture and Natural Resources Group
		LKS: Please attach a copy of the Builder's Paving Permit receipt from the tation or Department of Buildings.
ARCHITECT,	LANDS	APE ARCHITECT, ARTIST, ENGINEER, DESIGNER OR CONSERVATOR:
Name		
Firm		
Address		
City, State, Zi	p Code	
Telephone, F	ax, Ema	
OWNER OF P	RIVATE	STRUCTURE OR DESIGNATED REPRESENTATIVE, IF APPLICABLE:
Signature		Date
Name		
Address		
City, State, Zi	ip Code	
Telephone, F	ax, Ema	
COMMISSION OVER PROPE	_	ESIGNATED REPRESENTATIVE OF CITY AGENCY WITH JURISDICTION
Signature		Date
Name		
Title		
Agency		

If two or more agencies have jurisdiction, please attach additional signatures with the signatory's name, title and agency affiliation, as needed.