

APPLICATION FOR MURAL REVIEW AND APPROVAL  
BY MAIN STREET ADVISORY BOARD

Name of Building Owner: \_\_\_\_\_  
Address of Building: \_\_\_\_\_  
Building Owner Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Artist: \_\_\_\_\_  
Artist Business Name, if applicable: \_\_\_\_\_  
Artist Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Content Description of Mural: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Projected Start Date: \_\_\_\_\_ Projected Completion Date: \_\_\_\_\_

**To ensure your Application is complete, check off the following as enclosed:**

- \_\_\_ Completed and signed Application
- \_\_\_ Description of Project to include materials, method of application
- \_\_\_ Color drawings and/or renderings of design
- \_\_\_ Examples of previous work, including location

Upon approval by the Main Street Advisory Board, as Owner of the Building, I accept responsibility to maintain the integrity of the approved mural.

Signature of Building Owner: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that as of the date of this Application I am 18 years of age or older, as are any members of my team, if applicable. I certify that all examples of artwork submitted with this Application are products of my hand as represented. If accepted, the artwork produced will be the same as represented in this Application. I allow images of my work to be used in publicity for the City of Taylor, Texas. I further certify that all statements made in this Application are true to the best of my knowledge. I acknowledge that the City of Taylor, Texas, is not liable for loss or damage to work submitted.

Signature of Artist: \_\_\_\_\_ Date: \_\_\_\_\_

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Reviewed by Main Street Advisory Board?  YES  NO

Comments from Main Street Advisory Board: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Main Street Advisory Board Chairman  
Date: \_\_\_\_\_

\_\_\_\_\_  
Main Street Manager  
Date: \_\_\_\_\_