

MEMORIAL PARKWAY APPLICATION

Board of Public Works
Citizens Square
200 East Berry Street, Suite 210
Fort Wayne, IN 46802

Phone: 260-427-1172 E-mail: Traffic@Cityoffortwayne.org

THE FOLLOWING REQUIREMENTS MUST BE MET BEFORE AN APPLICATION WILL BE PROCESSED:

2.	The application may be made no sooner than six months from the date of death of the person for
	whom the request is being made.

- 3. A map of the route for the memorial parkway designation.
- 4. A copy of the death certificate for the person whom the request is being made.

A completed application for the memorial parkway designation.

- 5. Written and detailed documentation that shows at least 20 years of demonstrated public/community service.
- 6. A petition that captures 80% of the affected and adjacent property owners (both residential and business) along the proposed route who are in favor of the designation.
- 7. Three letters of support:

1.

- 1) A letter from an organization, church or other institution in the Fort Wayne Community,
- 2) A letter from a person or group who has touched or affected by the service of the individual for whom the request is being made,
- 3) A letter from a past or current elected City of Fort Wayne Official.
- 8. Individuals with felony convictions will not be considered for memorial parkway designations.

9.	inclu (indi and is ur	iding th vidual/ replace	ne labo organiz ement o be co	r to ins zatiosn due to	tall the) will al norma	signs, so be r I wear a	at \$600 espons and tea	0.00 pe sible fo r, vanc	r sign per loo any costs a alism or natu	cation. The ssociated wingled	sign and post, applicant th maintenance s. If the applica costs, the signs	nt
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Date submitted			
Applicant's/Organization Name (contact persor	າ):		
Applicants/Organization Address:			
Street	City	State	Zip
Applicant's/Organization Phone: Home:		Work:	
Applicant's/Organization e-mail address:			
Name/Location of Memorial Parkway:			

MEMORIAL PARKWAY PETITION

e, the undersigned residents of	f the City of Fort Wayne, do hereby petition the	he Fort Wayne Board of Public Works				
designate the following location as a memorial parkway in memory of: (Please describe):						
W C A D N						
ddress (include Zip):						
ome Phone:	Work Phone:	:				
gnatures –						
gnature	Printed Name	Street Address & Zi				

	
 	

Please return petition to: **Board of Public Works Office**

Citizens Square

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