



City of Hibbing Community Project Request Form

Hibbing Memorial Building • 400 East 23rd Street • 218-362-5951

City Services Department Mission Statement

To enhance the quality of life of our citizens through its parks, facilities, and recreational opportunities to promote a healthy and enjoyable lifestyle for all.

How to apply

Save this form and complete it on a computer, or print a hard copy and complete it by hand. Then submit it by:

- Emailing it as an attachment to nickarola@hibbingmn.gov
- Bringing a hard copy to the City Services Office, 400 East 23rd St, Hibbing, MN 55746
- Mailing a hard copy to the City of Hibbing, Attn: City Services 400 East 23rd St, Hibbing, MN 55746

Supporting Parks and Recreation Mission *

Briefly describe how the project supports the mission and vision.

Applicant Name*

First

Last

Applicant Address

Address Line 1

Address Line 2

City

State

Zip Code

Phone *

Email *

Preferred Method of Communication *

☐ Phone Call ☐ Email

Organization / Company / Individual

PROJECT DESCRIPTION

Project Title

Select a title that provides a short description of the project.

Project Overview *

Describe the proposal including a general description of the concept.

Desired Project Location *

Provide the desired location of the project. Be specific and attach an image or map clearly identifying location(s).

Intended Users *

Describe the members of the public who would use and benefit from the proposal.

Timelines *

Desired project start date, time needed to begin, duration of project, etc. Describe any specific events or grant deadlines that need to be considered in the timeline.

Committed Partners *

List any committed partners and attach any letters of support.

SUPPORTING THE MISSION

Enhance the quality of life *

Describe how the project improves the quality of life of our citizens.

Parks, Facilities, and Recreational Opportunities

Describe how the project adds or improves a recreational offering and or facility in Hibbing.

Duplication/Conflict with Current Amenities *

Describe any other amenities in our community that are of similar nature to the proposed project, or conflicts with existing amenities or programs. For example, would this project replace an existing amenity?

Benefit to the Public *

List examples of how this project will improve inclusiveness and enhance the quality of life in our community.

Natural Resource Preservation *

Describe how the project impacts natural resources such as plants, wildlife, and water.

Design and Aesthetics *

Describe the design and visual impact of the project. Attach any supporting renderings or images.

MAINTENANCE AND OPERATIONS

The City of Hibbing relies on partnerships to improve, maintain, and operate park improvements.

Maintenance Plan *

Describe the proposed long & short term maintenance plans for the improvement, repair plans, and restoration plan for the project.

City Maintenance*

Describe how this project will impact the general maintenance needs and the expectations from City staff to perform these duties.

Operations*

Describe the operations plan for the project such as staffing, daily oversight, reporting, marketing, etc.

Attach any additional project drawings, site plans, maps, photos, budgets on a separate sheet.

FINANCIAL INFORMATION

Project Budget/Funding Sources *

Provide budget details, funding sources and uses of funds, and attach a full project budget on a separate sheet. Is the applicant seeking City funding or resources to support the project.

Economic Impact *

Describe the direct or indirect financial benefit to the City of Hibbing. Examples include: payment of rent or fees, etc.

Once complete, submit this application form by:

- Emailing it as an attachment to nickarola@hibbingmn.gov
- Bringing a hard copy to the City Services Office, 400 East 23rd Ave, Hibbing MN 55746
- Mailing a hard copy to the City of Hibbing, Attn: City Services 400 East 23rd St, Hibbing, MN 55746

THANK YOU!