

**OPERATION CIVIC PRIDE  
GRANT APPLICATION FORM**

Please mail or deliver applications to:  
Madera District Chamber of Commerce, 120 North E Street, Madera CA 93638

---

1. Organization Name: \_\_\_\_\_

2. Tax Exempt ID Number (If applicable): \_\_\_\_\_

2. Organization Contact: \_\_\_\_\_

3. Mailing Address: \_\_\_\_\_

4. City, State, Zip Code: \_\_\_\_\_

5. E-mail Address: \_\_\_\_\_

6. Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

7. Description of Organization/Group  
(General background, purpose, experience with similar projects, if any.)

---

---

---

---

---

---

---

---

8. Description of Project: (state what you want to do and why)

---

---

---

---

---

---

---

---

---

9. Location of Project: \_\_\_\_\_

10. Anticipated Start Date: \_\_\_\_\_

11. Anticipated Completion Date: \_\_\_\_\_

12. Describe the maintenance required for the project: \_\_\_\_\_

---

---

---

13. If required, who will be responsible for project maintenance for the next three (3) years, and how often?

---

---

---

---

14. Please list materials that may be needed for this project. \_\_\_\_\_

---

---

---