



## AES INDIANA PROJECT GREENSPACE APPLICATION

### Completing an Application:

1. Complete all pages of this application.
2. Your application requires having a steering committee of at least 5 members who will be engaged in the GreenSpace design and implementation process.
3. Include at least 3 project site photographs.
4. Include any other attachments that may assist us in understanding your project plans such as any preliminary designs, and/or ideas for any public art.
5. Applicants are encouraged to review the GreenSpace process on the KIB website: <https://www.kibi.org/AES-Indiana-project-greenspace>
6. If you have any questions about this application, please contact Kelly Cook, GreenSpace Program Director, at [kcook@kibi.org](mailto:kcook@kibi.org)
7. If you choose not to submit online, mail any hard-copy applications to:

Kelly Cook  
Keep Indianapolis Beautiful, Inc.  
1029 E. Fletcher Ave., Suite #100  
Indianapolis, IN 46203

Please note that this is not a cash grant, but a service grant. KIB provides support in the form of creating a design, implementing the project, and helping to maintain the space.

Applications for the 2025 Selection Pool are due on 5/24/2024. Any applications received after this deadline may still be considered for the 2025 Selection Pool

**General Information:**

1. Organization or group name:
2. Applicant full name:
3. Applicant mailing address:
4. Primary phone number:
5. Email:
6. Project site address:
7. Have you applied previously for an AES Indiana Project GreenSpace grant (formerly IPL Project GreenSpace) at this site or any other?
8. How did you hear about us?
9. Have you worked with KIB in any capacity in the past? If “yes” what has been your involvement?
10. What other organizations or partnerships do you hope to engage during the creation of this space?
11. Do you have any other avenues of funding to provide support for this project?

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**Proposed Project Description:**

1. What is your vision?

2. Goal #1:

3. Goal #2:

4. Goal #3:

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5. Who presently owns the property where you would like this proposed project to occur?

6. If you do not own the land how do you plan to work with the property owner in the creation and care of this project?

**Helping People and Nature Thrive:**

1. How do you feel your project will serve your local community?

2. How do you feel your project will impact environmental health?

3. What types of elements of place (seating, pathways, patios, artwork, structures, etc.) do you envision for your space?

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4. How do you plan to provide maintenance for the space?

5. KIB is only able to support a small percentage of total applications received. What other compelling aspects of your project set it apart from others?

6. Please explain in detail how your group plans to maintain your proposed project?

**Please Read the Following and Sign:**

These pages must be completed in its entirety in order for the application to be valid. Please either mail or sign then fax, or scan and email the application to us. Signing this document indicates that you have carefully read the information provided about the AES Indiana Project GreenSpace program. Upon submission of this application, the steering committee (must be a minimum of 5 people) is agreeing that if they receive this grant assistance, they pledge to be good stewards of the resources received not only by working cooperatively with the KIB staff to complete the project to the best of their ability, but also through their commitment to the long-term care of the completed project.

Chairperson Printed Name: \_\_\_\_\_

Chairperson Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Teammate #1 Printed Name: \_\_\_\_\_

Teammate #1 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Teammate #2 Printed Name: \_\_\_\_\_

Teammate #2 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Teammate #3 Printed Name: \_\_\_\_\_

Teammate #3 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Teammate #4 Printed Name: \_\_\_\_\_

Teammate #4 Signature: \_\_\_\_\_ Date: \_\_\_\_\_