

**City of Taneytown Department of Parks & Recreation**  
**PROPOSED PROJECT OR SERVICE REQUEST FORM for**  
**Unsolicited Proposals**

*Please complete all sections of this form as completely as you can to the best of your ability. Completed forms must be submitted to the Director of the Department of Parks & Recreation. The Director and the Parks & Recreation Advisory Board will consider and evaluate the request. Requests will primarily be evaluated to see if they fit within existing planning documents e.g., park master plan and maps, facility plans and layout sheets, etc. If a request for a park project or service is inconsistent with an existing plan, or involves a change of use, your request form must present a defensible rationale and show broad community support for the change. With those considerations in mind, please provide the following information and answers to the questions. If you need assistance with the form, please contact Lorena Vaccare, the Director of the Department, by phone, 410-751-1100, or email, lvaccare@taneytown.org.*

*Return completed request forms by:*

Email: lvaccare@taneytown.org

Mail: Director of Parks & Recreation, 17 East Baltimore Street, Taneytown, MD 21787

Fax: 410-751-1608

**Contact Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Organization (if applicable): \_\_\_\_\_

**Proposed Project or Service Proposal**

This is a proposal for:

A new project or service (adds a feature, amenity or service that does not currently exist in the park).

An improvement project or improved or expanded service (improves a feature, amenity, or service currently present in the park).

Proposal Date: \_\_\_\_\_

Park name and location of proposed project or service within the park (*please attach a map indicating proposed project or service location, or clearly describe the location*): \_\_\_\_\_

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Proposed Project or Service Description \_\_\_\_\_

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**Proposed Project or Service Considerations**

Describe how it was determined there is a need for the proposed use. \_\_\_\_\_

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Describe other uses, such as sports, picnicking, etc., that currently take place in the proposed project or service area: \_\_\_\_\_

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Would the proposed project or service change how the park is currently used?

- Yes
- No
- Unknown: If unknown, describe the kind of additional information needed to make a determination. \_\_\_\_\_

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Describe how your proposed project or service might impact or conflict with those current uses or services. \_\_\_\_\_

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Suggest possible ways to avoid any potential conflicts. \_\_\_\_\_

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Would the proposed project or service increase number of visitors to the park?

- Yes. If yes, by approximately how many visitors? \_\_\_\_\_

Indicate during certain time periods, during the day or week, or certain seasons \_\_\_\_\_

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- No
- Unknown: If unknown, describe the kind of additional information needed to make a determination. \_\_\_\_\_

Would the proposed project or service have impacts on existing park infrastructure, such as parking and restrooms?

- Yes. If yes, describe these impacts. \_\_\_\_\_

- No
- Unknown: If unknown, describe the kind of additional information needed to make a determination. \_\_\_\_\_

Would the proposed project or service have an impact on surrounding uses, e.g., neighbors, schools, businesses?

- Yes. If yes, describe these impacts. \_\_\_\_\_

- No
- Unknown: If unknown, describe the kind of additional information needed to make a determination. \_\_\_\_\_

**Community Support**

Does the proposed project or service have broad community support?

- Yes. If yes, how was that support determined? \_\_\_\_\_

- No
- Unknown: If unknown, describe the kind of additional information needed to make a determination. \_\_\_\_\_

**Funding Summary**

Initial proposed project or service cost estimate: (attach additional sheets as needed)

Private Donation(s): Names & Amount: _____	\$ _____	____%
Grant(s): Names & Amount(s): _____	\$ _____	____%
Capital: _____	\$ _____	____%
Other (describe): _____	\$ _____	____%
	Total: \$ _____	=100%

How did you determine this cost estimate? \_\_\_\_\_

Does the proposed project or service have ongoing operation and maintenance costs?

Yes. If yes, please provide your estimate of these costs. \_\_\_\_\_

No

Unknown: If unknown, describe the kind of additional information needed to make a determination. \_\_\_\_\_

**Other Comments & Attachments**

Please provide or attach any additional information you wish to about this proposed project or service.

List any attachments you are providing: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***FOR INTERNAL USE ONLY – PRELIMINARY REVIEW***

\_\_\_\_\_ No funding required, this is usual and customary work the Department of Parks & Recreation performs for the public. Proceed to schedule for implementation.

\_\_\_\_\_ This proposed project or service is eligible for capital funding. Proceed to evaluate this request.

\_\_\_\_\_ This proposed project or service has associated leverage funding. Proceed to evaluate this request.

\_\_\_\_\_ This proposed project or service is proposed to be paid for in all or part by the Department of Parks & Recreation. Proceed to evaluate this request.

\_\_\_\_\_ This proposed project or service is a donation. Proceed to evaluate this request.

\_\_\_\_\_ Evaluation of this request for the proposed project or service is delayed or denied because the submitted request form is incomplete or inadequate. Proceed to respond to the requestor with an explanation.

Additional notes:

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