



# Vibrant Neighborhoods

## Grants Program

### Vibrant Neighborhoods Grant Program Application FY 2026

VNG00 \_\_\_\_\_

Administrative Use Only

#### Instructions to Applicants:

Each application must include one original with support materials clearly labeled. See the checklist of items to be included. Applications may be emailed to [neighborhoods@talgov.com](mailto:neighborhoods@talgov.com). Applications may also be mailed or hand-delivered to: City of Tallahassee Neighborhood Affairs Division, Smith-Williams Service Center, 2295 Pasco Street, Tallahassee, Florida, 32310.

#### SECTION I - GENERAL INFORMATION

Neighborhood Organization Name: \_\_\_\_\_

Project Title: \_\_\_\_\_

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

Phone: \_\_\_\_\_ (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_ (Other)

Incorporated: ☐ Yes ☐ No If yes, enclose a copy of the State of Florida Incorporation Certificate.

Board Member Position	Name	Address

Project Manager Name and Contact Information:

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

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

Authorized Applicant Representative:

**I hereby certify that the information contained in this application is correct and represents the consensus of the referenced neighborhood.**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date



CITY OF  
TALLAHASSEE

## SECTION II - PROJECT DESCRIPTION

### 1. PROPOSED PROJECT

(A) Describe your project. What will it produce? (e.g. a physical improvement such as neighborhood entrance beautification, signage or landscaping; neighborhood lighting enhancements, etc.). If the project involves landscaping, please complete Attachment 2 contained in this application. For physical improvements, attach a design plan.

(B) What is the specific location of your project? Two (2) photos of the current conditions of the project site are required for physical improvements. Also, please provide a written description and attach a map. To obtain a map, it might be helpful to have the tax identification number for reference. Contact the Neighborhood Affairs Office at (850) 891-8795 for assistance or inquire directly to the Leon County Tax Appraiser's office at (850) 488-6103.

(C) Complete the project timeline. Describe the major activities/tasks that make up the project and estimated completion date. Be specific.

Task	Estimated Completion Date
<i>Ex: Purchase plants</i>	<i>October 30, 2019</i>

(D) Maintenance of the project once it has been completed is important. It is not the intent of this program to increase maintenance activities for City staff. As such, the applicant is required to provide any additional maintenance that may be necessary. Describe how the project will be maintained.



## **2. NEIGHBORHOOD IMPACT**

What is the intended public benefit of the project? Why is it of importance to the neighborhood? (Use additional pages if necessary.)

## **3. CAPACITY**

Describe the capacity of the organization to complete this project. List previous projects completed, or events held within the neighborhood.

## **4. PARTICIPATION/COLLABORATION**

(A) Neighborhood resident support and participation is critical to the award of a grant. Grant applications that demonstrate strong support will be given more consideration than those that do not. Describe how neighborhood support has been and will be obtained and who will participate. Include any collaboration with outside groups or use of other community resources. Provide letters from supporters and/or signatures with phone numbers.



(B) It is important to have the support of the residents immediately adjacent to a proposed physical improvement or event. As an example, if you are proposing to put a sign in the right of way next to a home, the resident should be contacted about the project. If you are planning to have a block party on a certain street, the residents of that street should be aware. Attach the Adjacent Resident Support Form (Attachment 4) and include with the application.

Attachment 4 is enclosed      ☐ Yes   ☐ No

#### **SECTION IV - PROJECT BUDGET**

The project budget is the most important part of the application. It details the project expenses and matching funds. Please complete the budget worksheet. This is a separate Excel file that can be found on the program's webpage.

Note: There is a second sheet within the file that is used to calculate volunteer time contributions. Please complete that sheet if using volunteer time as part of your match.

##### **1. MATCHING FUNDS**

Please list the sources of matching funds that the neighborhood plans to contribute to support the project, such as in-kind labor, materials, or cash. Requested funds must be matched 50%. These will be further outlined in the budget.





## **Vibrant Neighborhoods Grant Program Attachment 1- Application Checklist**

Each application package should include:

- ☐ One original signed application with support materials clearly labeled
- ☐ One completed Budget Form (both tabs if using volunteer time)
- ☐ If incorporated, a copy of the State of Florida Incorporation Certificate
- ☐ One design plan, if applicable
- ☐ Attachment 2: Detailed planting plan (for landscape projects)
- ☐ Attachment 4: Adjacent Resident Support Form (if applicable)
- ☐ 2 photos of current conditions of project site (if applicable)
- ☐ Signature of applicant's representative
- ☐ Map of project site (if applicable)
- ☐ Three cost quotes for each vendor service or purchase over \$3,000 (REQUIRED)
- ☐ Any additional letters of support you would like to include
- ☐ Documentation of Matching Funds:
  - Volunteer Sign-in sheet(s)- for pre-application time (Attachment 5)
  - Volunteer Pledge sheet(s)- for future volunteer time (Attachment 6)
  - Contribution Template(s)- for cash and in-kind donations (Attachment 3)
  - Documentation of the association's most current bank account balance if matching funds are to be drawn from that account.





## Vibrant Neighborhoods Grant Program Attachment 2- Landscaping Materials and Plans

Planting Summary: List each species of plant to be included in your proposed project. Use either the common or Latin name. Provide the number of the species to be included. Provide the size of each plant at the time of planting (e.g. 3 gallon, 2" pot, 6' height, etc.) Plants must be perennials and no exotic or invasive species are allowed. Note: VNG funds can only be used to purchase perennial plants. The purchase of annual plants is not allowed. However, annual plants purchased with neighborhoods funds can count toward the matching funds contribution. If annuals are to be purchased with neighborhood funds as part of the project, they should be listed below.

Plant species (common or Latin name)	Number	Size (inch, gallon or feet)
<i>Ex: Sabal Palm</i>	<i>20</i>	<i>13' Clear Trunk</i>
<i>Ex: Black-Eyed Susan</i>	<i>40</i>	<i>4" pot</i>

A sketch of the planting plan must be included. Include spacing of plant material, locations of signs, above ground wires, pavement, driveways or other obstructions and existing plant material.





## Attachment 3

### Matching Funds Contribution Template/Sample Letter

\*Recommended template for documenting cash and in-kind contributions.

Date

Name(s) of donor

Address

City, State Zip

Phone number

Dear Grant Review Team members,

It is my/our understanding that \_\_\_\_\_ is applying for the City of Tallahassee's Vibrant Neighborhoods Matching Grant program. \_\_\_\_\_ is pleased to support this organization in their endeavor and (Your name or company/agency name) would like to make the following contribution(s):

☐ In-Kind Contribution:

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Valued at: \$\_\_\_\_\_

☐ Cash contribution \$\_\_\_\_\_

**Combined contribution total \$\_\_\_\_\_**

Sincerely,

Signature(s)





## Attachment 4

### Adjacent Resident Support Form

Neighborhood: \_\_\_\_\_

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

Name	Address	Phone	Signature	I DO give my support	I DO NOT give my support
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>





**Attachment 5**  
**Vibrant Neighborhoods Grant Program**  
**Volunteer Sign-In Sheet**

(Actual volunteer hours completed - for pre-application documentation and post-award reporting)

Volunteer Name	Neighborhood Resident (Y/N)	# of hours/date	Signature





**Attachment 6**  
**Vibrant Neighborhoods Grant Program**  
**Volunteer Pledge Sheet**

Page \_\_\_\_\_ of \_\_\_\_\_

**Volunteer Activity:** \_\_\_\_\_

**Approximate Date:** \_\_\_\_\_

Name	Phone #	Email	# of hours pledged	Signature

## Attachment 7

### Vibrant Neighborhoods Grant Program Reimbursement Form

**Neighborhood Organization:** \_\_\_\_\_

**Name of Project:** \_\_\_\_\_

Vendor/Business	Date	Item	Cost
<i>Ex: Home Depot</i>	<i>12.15.2020</i>	<i>20 bags mulch</i>	<i>\$81.55</i>

**TOTAL:** \_\_\_\_\_

**Please attach all receipts.**