

## **GRAFFITI REMOVAL VOLUNTEER PROGRAM**

## KNYCB BEAUTIFICATION PROJECT

COMMUNITY GROUP:	
CONTACT PERSON:	_TELEPHONE:
CONTACT PERSON EMAIL:	
SANITATION DISTRICT:PRECINT:	CB#:
LOCATION(S) TO BE CLEANED:	
RESIDENTIAL OR COMMERCIAL:	
BEUTIFICATION PLAN:	
EVENT DATE: EVENT TIME:	
PAINT SUPPLIES REQUIRED & QUANITITY:	
GRAY BRICK RED WHITE TAN	BLACKOTHER
ROLLER SLEEVES ROLLER FRAMES TF	RAYS POLES
BRUSHES DROPCLOTHS	

**NOTICE:** All clean-ups may be monitored during the event to ensure the proper use of supplies. You must obtain a consent waiver from private property owners. Additional forms are available upon request. Please include waivers with the application and pictures of location to be cleaned before you submitted to the DSNY. After the completion of your project, submit pictures and a project report to DSNY via mail or email: **customerservice@dsny.nyc.gov**.

Authorized by:\_

NYC Dept. of Sanitation / Division of Customer Service & Government Relations

Date

Fax this form to (212) 788-9336, Or mail to:

**Graffiti Removal Volunteer Program** Division of Customer Service and Government Relations, NYC Department of Sanitation 125 Worth Street, Room # 728 New York, NY, 10013 (646) 885-4503.