



Mural Application

Fee \$150

Community Development Department
317 North Douty Street
Hanford, CA 93230
Office (559)585-2580
FAX (559)585-1633
Website: www.cityofhanfordca.com
TDD/TTY, Dial 711

Mural applications shall be approved by the City Council. Mural applications within the Central Parking and Business Improvement District will be submitted to the Main Street Hanford Design Review Committee for a recommendation.

MURAL INFORMATION

Business Name	
Mural Location	
Mural Dimensions	
Mural Subject Matter	
Mural Meaning & Significance - Attach additional sheets if necessary	
Material Type - Shall be vandal and graffiti resistant	
Artistic credentials of the artist preparing the mural design	

APPLICANT INFORMATION

FINAL COMMENTS WILL BE MAILED TO THE ADDRESS PROVIDED BELOW (CHECK ONE)

MAILING ADDRESS EMAIL ADDRESS

Name	
Address	
City, State, Zip	
Phone Number	
Email Address	

ARE YOU THE PROPERTY OWNER YES NO

If signed by other than the property owner, the Agency Authorization Form on the reverse page must be completed.

Signature:

ARTIST INFORMATION

Name	
Phone Number	
Email Address	

Wall Mural Requirements (MC 17.56.230)

Please submit one sketch or photo of an elevation drawing, prepared to a 1:12 scale [1 inch = 1 foot] minimum, with dimensions accurately depicting the mural to be painted.

Requirements:

- No advertising
- Subject matter shall be of historical significance regarding the growth/development of the City of Hanford and its surrounding environs
- To the extent feasible, the mural shall be vandal and graffiti resistant
- Paint and/or materials shall be appropriate for outdoor use and shall be permanent/long lasting
- Wall murals may not be prefabricated and thereafter mounted onto a building
- The City Council shall identify conditions of approval to the issuance of a wall mural permit

Agency Authorization Form

OWNER:

I, _____, declare as follows:
(Property Owner's Name)

I am the owner of certain real property bearing assessor's parcel numbers(s) (APN's):

AGENT:

I designate _____, to act as my duly authorized agent
(Agent's Name) (Please type or print.)
for all purposes necessary to (list permit type) _____
relative to the property mentioned herein.

DECLARATION:

I declare under penalty of perjury the forgoing is true and correct.

Executed this _____ day of _____, 20_____.

OWNER

(Signature of Owner)

(Mailing Address of Owner)

(Owner Phone Number)

AGENT

(Signature of Agent)

(Mailing Address of Agent)

(Agent Phone Number)

APPROVED BY CITY OF HANFORD

Date: _____
(Signature)