

# Public Artist Project Detail Sheet

*Form should be completed by Business/Organization*

Applicant Name: \_\_\_\_\_ Form Completed: \_\_\_\_\_

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

Applicant email: \_\_\_\_\_ Applicant phone: \_\_\_\_\_

Purpose of Proposed Public Art: \_\_\_\_\_

Dimensions of surface/area: \_\_\_\_\_ Surface type: \_\_\_\_\_

Artist(s): \_\_\_\_\_ Date(s) of work/installation: \_\_\_\_\_

Location of Public Art (including address/site photos): \_\_\_\_\_

Choose:      Indoor      Outdoor

Start Date/Time: \_\_\_\_\_ End Date/Time: \_\_\_\_\_

Working Hours: \_\_\_\_\_

Insurance:      Waiver approved Property Owner      Artist COI Attached

## Additional Info

Is artist represented by an agent?      Yes      No

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

Individual Artist/Collaborative - Provide Details: \_\_\_\_\_

Has the artist(s) completed projects of this caliber:      Yes      No

Have they worked in this same medium:      Yes      No

Do they have experience applying clear-coating:      Yes      No      NA

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Provide Product Experience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

As a part of the project the artist(s) will be applying the clear-coating: Yes No

If no, who will be or why is it not needed? \_\_\_\_\_

As a part of project completion, the artist(s) will secure and provide all product warranties to the Owner? Yes No

Is this artist scheduled to work/install additional public art during or near this timeframe?

Yes No

Where/When: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long has the artist been working on public art of this caliber and size: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How many pieces of this caliber and size: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Where have they installed public art: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Awards/Publications: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What other artists were researched/reached out to for this project: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did you find this artist? \_\_\_\_\_ Artist Roster \_\_\_\_\_

## Equipment/Assets/Site Preparation

Equipment Required: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Clear-Coating (be specific including number of layers): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Other Materials: \_\_\_\_\_

Surface/Site Preparations (and who will provide this): \_\_\_\_\_

Has the artist provided a concept rendering/notation: Yes No

Is the Concept Development part of the proposed project: Yes No

Are there Partner Organizations/businesses part of the project: Yes No

Organization(s): \_\_\_\_\_

Is community input a part of the project: Yes No

How will this be accomplished: \_\_\_\_\_

When: \_\_\_\_\_

Are there any sponsors/donors: Yes No

List them: \_\_\_\_\_

Sponsor/Donor Recognition (Benefits): \_\_\_\_\_

Does this project require Engineering/other approval: Yes No

Why? \_\_\_\_\_

What type of ownership of the property: Private Non-Profit

Has an MOU been secured? \_\_\_\_\_

Is this an FDOT Coordinated Project? Yes No Not Sure

Details: \_\_\_\_\_

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Is this replacing an existing Public Art Piece: Yes No

What type of maintenance is needed for this piece? \_\_\_\_\_

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For how long? \_\_\_\_\_

Warranty Period: \_\_\_\_\_

Artist availability/cost for maintenance (if applicable): \_\_\_\_\_

If maintenance not provided by artist, what is the maintenance plan/timeline? \_\_\_\_\_

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Marketing Materials Requested:

Press Release

Postcard

Brochure

Social Media

FL Mural Trail

FL Assoc. of Public Art

Photography/Videography Details: \_\_\_\_\_

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Other: \_\_\_\_\_

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