

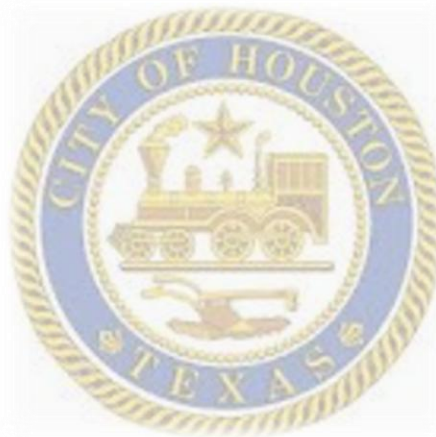
# Department of Neighborhoods

*FY 2026-2027 Super Neighborhoods Grant Initiative Application*

***APPLICATION DUE DATE 10/19/2026 by 5:00p.m.***



# Super Neighborhoods Grant Initiative Application FY2026 - 2027



# Department of Neighborhoods

## *FY 2026-2027 Super Neighborhoods Grant Initiative Application*

***APPLICATION DUE DATE 10/19/2026 by 5:00p.m.***

### Part I – General Information

Applicant Name

Property Address

City, State & Zip Code

Phone

Alt Phone

Email

### Part II – Super Neighborhood Information

Super Neighborhood  
Name & Address

Project Physical Address

Council District

Property Owner Name(s)

Title of Project

Total Reimbursement  
Amount (*max \$7,000*)

Project Brief Description

*(Add 8 ½ x 11 plains sheet  
for more details)*

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### Part III – Proposed Project(s) Information

1. Will the proposed project require frequent maintenance beyond the grant period? If so, how will you maintain the project? Please be specific. \_\_\_\_\_

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2. Describe the current condition for the proposed project site?

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3. How will the proposed project improve the property? Please be specific. \_\_\_\_\_

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4. Describe the project after completion with the final visible aesthetic? \_\_\_\_\_

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5. How will the other neighborhood members be involved with the planning and implementation processes? \_\_\_\_\_

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6. Is the super neighborhood a non-profit or will the super neighborhood work with a non-profit?

☐ Yes      ☐ No

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### **Certification by the Super Neighborhood Organization**

By signing this application, we certify that the information contained in this application is true and correct to the best of our knowledge. We certify the applying organization supports this project and have been approved as a body. We also understand and agree to the requirements of the Super Neighborhood Grant Program and invite the City to any promotional activities associated with our project.

President or Board Chair Print Name \_\_\_\_\_

President or Board Chair Signature \_\_\_\_\_ Date \_\_\_\_\_

Treasurer/Secretary Print Name \_\_\_\_\_

Treasurer/Secretary Signature \_\_\_\_\_ Date \_\_\_\_\_

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### **Scope of Work Worksheet**

**Project Timeline** -Provide a timeline for each phase of your project (i.e. install irrigation, purchase plants, planting, etc. on the following page. Please attach a separate document if necessary.)

| Project Activity Description |  |
|------------------------------|--|
|                              |  |
|                              |  |
|                              |  |
|                              |  |
|                              |  |

***Estimated Completion Date*** \_\_\_\_\_

### **Part IV-REQUIRED CITY APPROVALS**

#### **Certification by City of Houston Department(s):**

By signing this application, **DON** certify that we're authorized to sign on behalf of the department listed in this signature. We understand and agree to the requirements of the Super Neighborhood Grant Program. We certify, the applying organization has met the requirements for the department's project and the project is approved. *\*Please indicate if you are signing by permission of the authorized person. \**

\_\_\_\_\_  
**Mayor's Assistance Office, DON Manager**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Department of Neighborhoods  
Director, Herbert Sims Jr.**

\_\_\_\_\_  
**Date**

# Department of Neighborhoods

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### **Project Qualifications Checklist & Due Dates**

*Please submit the requirements below with the application.*

- ☐ *The properties owned by individuals, corporations, & LLCs., must have a signed permission letter from the property owner(s)*
- ☐ *Must have proof of property ownership (ex. Deed, HCAD/FBCAD record)*
- ☐ *Photographs of the proposed property*
- ☐ *Property must be accessible to all City of Houston residents for eligibility*
- ☐ *SN Meeting minutes with required approval vote*
- ☐ *Three (3) signed letters of support for the project*
- ☐ *All required City of Houston approval(s)*
- ☐ *Scope of Work/Quote – concise explanation of project with cost estimate*

