



NEIGHBORHOOD PARTNERSHIP REGISTRATION FORM

Neighborhood Partnership Office
5850 W. Glendale Avenue, Suite 270
Glendale, Arizona 85301
(623) 930-2868 * Fax (623) 931-6433

Please type or print all answers and ensure all information requested is complete. Completion of this form signifies that you have read and understand the guidelines for registering your neighborhood with the City of Glendale.

(Please mail, fax or deliver application to the Neighborhood Partnership Office at the address noted above.)

Neighborhood Registration Guidelines

The following neighborhood registration guidelines were reviewed and approved by the Citizens Advisory Commission on Neighborhoods October 6, 2010:

1. The ideal size of a neighborhood should range between 20 and 100 homes. Although any neighborhood is free to determine its own boundaries, it is recommended that it not exceed an area larger than one quarter-mile section for traditional neighborhoods.
2. In addition to single family homes, neighborhood boundaries can include: schools, churches, parks, apartments, businesses, and all other features identified as being a part of the neighborhood.
3. Neighborhoods are encouraged not to cross major arterial streets or other barriers (natural or man-made) when defining boundaries. It is difficult to develop a unified neighborhood if part of it is isolated due to these factors.
4. In the event neighborhood boundaries "overlap" with those of another neighborhood, the city will acknowledge the boundaries, provided those residing within the overlap area identify which neighborhood association they wish to belong.
5. Effective January 1, 2011, registered neighborhoods will be required to renew their neighborhood information and registration status on an annual basis.
6. Each registered neighborhood will be required to conduct one or more meetings or event per year & is recommended to communicate at least twice a year (newsletter, flyer, neighborhood webpage).
7. If there are disputes related to overlapping neighborhood boundaries, it will be up to the residents in those areas to resolve them.
8. All current forms and systems used to implement these guidelines shall be developed in a manner so as to be complementary of them.

NEIGHBORHOOD INFORMATION

I. Organization Name: _____

II. Year Neighborhood was built: _____

III. Represents: # Single-family Households _____ #Multi-family Households _____
Commercial Properties _____ #Vacant Lots _____

IV. Organization Boundaries: North _____ South _____
West _____ East _____

V. Public Services/Resources: Arizona Public Service or Salt River Project (Circle One)

VI. List schools, parks and churches within the organization's listed boundaries:

Name Address

Name Address

VII. Is your organization: Please indicate (yes) or (no) on all that apply:

___ HOA* ___ Traditional Neighborhood (non-HOA)

*If governed by a Management Company, please provide contact information:

Representative's Name: _____ Management Company: _____

Address: _____ Phone: () _____

Fax: () _____ E-Mail: _____

VIII. City Council District: ___ Barrel ___ Cactus ___ Cholla
___ Ocotillo ___ Sahuaro ___ Yucca

IX. School District: ___ Alhambra ___ Deer Valley ___ Glendale
___ Pendergast ___ Peoria ___ Washington

X. Does your neighborhood organization currently have a newsletter? Yes or No
If no, are you interested in starting one? Yes or No

GENERAL INFORMATION

PRIMARY CONTACT:

Name: _____
(Last) (First) (Middle Initial)

Address: _____
(Street) (City/State) (Zip)

Phone: (____) _____ (____) _____
(Home) (Alternate number, if applicable)

E-mail address: _____

Signature _____ Date _____

SECONDARY CONTACT:

Name: _____
(Last) (First) (Middle Initial)

Address: _____
(Street) (City/State) (Zip)

Phone: (____) _____ (____) _____
(Home) (Alternate number, if applicable)

E-mail address: _____

Signature _____ Date _____

BOARD MEMBERS: (if applicable) (Names and phone numbers if different from primary and secondary contacts)

President: _____ Vice-President: _____

Secretary: _____ Treasurer: _____

ORGANIZATION WEB SITE ADDRESS: _____

MEETINGS: ___ Monthly ___ Annually General Location _____ Time _____

List of neighborhood concerns/issues:

(For Office Use Only):

Reviewed by _____ Date Received _____ Date Entered _____ Correspondence Mailed _____

All information on this sheet is a matter of public record and will be released to third parties upon request.