To the Visual Arts Commission City of Sioux Falls Sioux Falls, SD 57117

Visual Arts Commission Public Art Presentation Form City of Sioux Falls



Presenter's Name(s)			Date
If applicable, Donor Name(s)			Date
Contact Person Name			Date
Address City	State		Zip
Telephone (h)			•
Emoil	(")		
Artist Name			Date
Address			
City	State		Zip (Cell)
Telephone (h)	(w)		(Cell)
Artwork			
Title			
Height	Width	Length	Weight
Proposed location			
If temporary, please define exact time fra	me		
Project completion time frame			
Please address the following evaluation criteria for the proposed permanent artwork placement on City-owned property:			
1) Appropriateness—How is the content or obvious symbolism of the proposed piece of artwork appropriate for those who will view the art, and is it within the context of the site where it will be viewed?			
2) Relevance —Does the artwork seem particularly relevant to the place where it will be displayed or the public who will view it?			
3) Site plan —Does the scale of the arty	work in appropriately within and	u complement and/or en	mance the physical location where it will be placed?
4) Installation cost—Are there any/significant costs associated with the installation of the artwork at the proposed site?			
5) Safety/security —How will the artwork be well-protected from potential theft and vandalism, and how will it be properly secured to ensure the safety of those around the artwork?			
6) Visibility/impact—Does the proposed location offer high visibility and/or impact to the public?			
7) Need—Does the organization or location where the artwork will be placed have the means and/or ability to procure artwork through other approaches? Are we serving locations and audiences deemed in greatest need?			
8) Is this art piece being donated to the City of Sioux Falls?			
9) Artwork concept/history/context:			
10) Installation; e.g., responsible party, method, and equipment requirements:			
11) Are City support services needed; e.g., utilities maintenance requirements, lighting, etc.?			
Please attach Artist(s) résumé, qualifications, references:			
I/we declare this art proposal is my/our original intellectual property.			
Name(s)	Name(s) Date		
Please attach one 8" x 10" illustration or photograph of the proposed artwork to be kept on file.			

Return the completed form to: Visual Arts Commission, c/o City Planning Office, 224 West Ninth Street, P.O. Box 7402 Sioux Falls, SD 57117-7402