CITY OF LOS ANGELES OFFICE OF THE CITY CLERK



APPLICATION TO NAME OR RENAME COMMUNITIES

Filing Requirement

Pursuant to Council action of January 31, 2006 (Council File 02-0196), an application, including a petition, must be submitted to either change a neighborhood name or create one where none previously existed. The petition must contain a minimum of 500 signatures of individuals who either reside in and/or have businesses, both profit and nonprofit, in the neighborhood being named or re-named. If the population of the neighborhood is under 2,500 people, then 20% of the population of the area being named or renamed is required. No fee is required for the submission of this application.

Please check one:	0	Name Community	0	Rename Existing Community
Petition Attached:	0	500 signatures	0	20% of population
				Population Total X .2 = No. of signatures required

1. APPLICANT INFORMATION

The application requests advocates for a name change to form a group of two or more members who reside within the boundaries of the area to be named.

Primary Applicant		
Name:		
Last	First	M.I.
· · · ·		
Mailing Address:		
	Street Address	
City	State	Zip
Ony	Oldie	
Telephone:	FAX:	
Email:		

Names and Contact Information of Other Advocates in Group

Name:			
	Last	First	M.I.
Mailing Addre	SS:		
		Street Address	
	City	State	Zip
Telephone:		FAX:	
Email:			
	******	* * * * * * * * * * * * * * *	
Name:			
Name:	Last		M.I.
	Last	First	M.I.
		First	M.I.
	Last	First	M.I. Zip
Mailing Addre	Last ss:	First Street Address State	Zip
Mailing Addre	Last ss: City	First Street Address State FAX:	Zip

**Please include additional members on separate sheet. **

2. COMMUNITY INFORMATION

Proposed Name of Community:

Current Name of Community (if applicable):

Reason for Name Change (Please state historical precedent or other reason):

Street boundaries of the community to be named / renamed (Please attach map and/or legal description):

Funding source(s) (cost is \$300-\$3000):_____

ON BEHALF OF THE AFOREMENTIONED ADVOCATES, THE UNDERSIGNED AGREES TO PROMPTLY NOTIFY THE CITY CLERK OF CHANGES TO THE FOREGOING INFORMATION AND AGREES TO SUBMIT A REVISED APPLICATION AND PETITION IN THE EVENT THAT THIS OCCURS.

Signature

Date

To be filed in the: Office of the City Clerk 200 North Spring Street, Room 395 Los Angeles, California 90012 <u>sharon.dickinson@lacity.org</u>; 213-978-0420

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