

**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) _____ (w) _____ (Cell) _____

Email _____

Artist Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Telephone (h) _____ (w) _____ (Cell) _____

Email _____

Artwork

Title _____

Height _____ Width _____ Length _____ Weight _____

Media _____ Approximate value \$ _____

Proposed location _____ Permanent or Temporary

If temporary, please define exact time frame _____

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 artwork fit appropriately within and complement and/or enhance the physical location where it will be placed?
- 4) **Installation and Maintenance cost**—Are there any/significant costs associated with the installation and maintenance 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) _____ 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