Thank you for your interest in placing artwork on property owned by Macon-Bibb County. Please complete and submit this application to:

Macon Arts Alliance  
486 1st St.  
Macon, GA 31201  

or maconartsalliance@gmail.com

For Assistance, please contact Macon-Bibb County Public Art Commission at 478-743-6940 or maconartsalliance@gmail.com. Macon-Bibb County Public Art Commission reserves the right to request additional information in order to process an exhibition proposal.

**APPLICANT**

- **Names(s)/Organization:**

- **Contact:**

- **Address:**

- **City:**  
  **State:**  
  **Zip:**

- **Phone:**  
  **Fax:**

- **Email:**  
  **Website:**

- **Credit Line (provide exhibitor’s name as it should appear in labels, publications and publicity):**

- **Conflict of Interest (disclose any active contracts or contract negotiations with Macon-Bibb County):**

**PROPOSED ARTWORK**

- **Title of proposed art work or exhibition:**

- **(Optional) Proposed Macon-Bibb County owned site for placement:**

- **Participants (list anyone that will be involved in the project):**
ART WORK DETAILS

Please attach a proposal that includes the following:

1. Narrative description of the artwork or project handling including:
   a. Concept
   b. Aesthetic vision
   c. Artist involvement
   d. Materials
   e. Processes
   f. Durability
   g. Other relevant information

2. Timeline and installation plan, including de-installation plan for temporary exhibits.

3. Budget and funding (explain project budget and how it will be funded.)

4. Maintenance plan, including funding for maintenance.

5. Qualification including:
   a. Artist(s) resume/bio
   b. Examples of past exhibits or similar projects

6. Visuals including:
   a. (If applicable) Digital, color images of artworks in exhibition
   b. Digital images of past exhibits or similar projects
   c. Maquette or rendering of artwork(s)

Submit application and supporting materials to:
Macon Bibb County
Public Art Commission
P. O. Box 972
Macon GA 31202

or digitally to:
maconartsalliance@gmail.com

APPLICATION’S AUTHORIZATION TO INITIATE REVIEW OF AN EXHIBITION PROPOSAL

Authorized signature:  
Title:  

Print name:  
Date:  

Macon-Bibb County Public Art Commission Staff Only:

Received by:  
Date:  