



# Fight the Blight Workshop Application Form

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone where you can be reached: \_\_\_\_\_

Email address: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Your Neighborhood Organization: \_\_\_\_\_

Please explain why you wish to participate in this workshop.

As a participant in this workshop, would you be an official representative of your neighborhood organization?

\_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ There is no organization in my neighborhood.

Part of the workshop is an interactive effort to look at real-world blight examples and solutions. If you are selected for this workshop, you will be asked to submit certain details (a short list of questions will be provided to you well in advance of the first session) of a blighted property in your neighborhood, as well as a picture. You will have the opportunity to share the information with the group. If selected for this workshop, can you provide this information?

\_\_\_\_\_ Yes \_\_\_\_\_ No

Please email this completed form to [chollifield@knoxvilletn.gov](mailto:chollifield@knoxvilletn.gov) or snail mail it to Cheri Hollifield, Neighborhood Codes Enforcement, City of Knoxville, P.O. Box 1631, Knoxville, TN 37901. Questions? Call Cheri Hollifield at 215-2867.