



Code Compliance Division
City of Pharr
118 S Cage Blvd
Pharr, TX. 78577
Phone: (956) 402-4222

2633

City of Pharr Address Plaque Assistance Program Application

Name: _____ Phone No. _____

Location Address: _____

By signing this agreement, I agree to the program guidelines that have been provided to me by the City of Pharr Code Compliance Division.

Check all that apply:

- That I am 65 years of age or older, reside within the city limits of Pharr and on a fixed income.
- Disabled, handicapped, or otherwise physically incapable of placing an address plaque outside my residence.
- I reside in the home and do not have any immediate family in the City of Pharr that can assist with placing address plaque outside my residence.

- 1) As part of the City's Address Plaque Assistance Program, Development Services Department coordinates with employees and skilled volunteers to support and assist property owners by offering a complementary address plaque to be placed in a visible area on the residence.
- 2) The undersigned, referred to as "Owner" herein, represents that they are the owners(s) of real property (the "Property") located at above-mentioned location.
- 3) By signing this form, the owner wishes to receive the benefits of the Address Plaque Assistance Program, and in consideration of the benefits, the owner grants permission to City employees and volunteers to access the property to provide the necessary services to said property.

GUIDELINES:

- APPLICATION MUST BE SUBMITTED AND APPROVED PRIOR TO SERVICES BEING PROVIDED.
- ONLY ONE (1) ADDRESS PLAQUE WILL BE PROVIDED TO THE APPLICANT'S RESIDENCE
- DEADLINE TO SUBMIT WILL BE THE 1ST FRIDAY OF EVERY MONTH TO BE CONSIDERED FOR THE NEXT SCHEDULED EVENT.

PERMISSION

I hereby give the City of Pharr and volunteers, permission to enter Property for the purpose of placing the address plaque outside the residence in a visible area. I hereby indemnify and hold harmless the City of Pharr from any and all claims arising out of or in connection with the event known as "Address Plaque Assistance Program". I affirm under penalty or perjury that the above information is true and correct. Additionally, I acknowledge that there are no concealed hazards on the property and that volunteers will have safe access to the areas necessary to place the address plaque.
