



2022 NONPROFIT SITE VISIT FORM

Contact Name:	Agency:
Phone:	Address:
Email:	
Total Number of Volunteers Needed:	Hours Needed To Complete All Projects:
Project # 1 Description:	
Project # 1 Address:	
Building or Trade Permits Required?	Yes No
If so, can one be obtained prior to starting project?	Yes No
For verification, contact the City of Hagerstown Permit Office at 301-739-8577 ext. 119 or the County Permit Office at 240-313-2435	
Which tasks can be completed from Agency's request? (Assessing time and costs)	
1. _____	
2. _____	
3. _____	
List of supplies for Teams to purchase or bring (Please be very specific to include paint colors, # of gallons, etc.):	
1. _____	
2. _____	
3. _____	
Any supplies being provided by Agency? Yes No (Do not include these items in supplies above) If so, please specify:	

Estimated cost of supplies:

Special Tools/Equipment Needed: (Including Truck/Trailer To Haul Away Items)

If needed, is there access to water and electricity? Yes No
If so, indicate location:

List any safety concerns for volunteers:

Can they be corrected? If so, how?

Is there adequate on-site parking? Yes No
If no, is there an alternate parking area? Yes No Location:

Any additional comments or concerns?

For Project one:

Number of Volunteers :

Time Required:

Project # 2 Description:

Project # 2 Address:

Building or Trade Permits Required? Yes No
If so, can one be obtained prior to starting project? Yes No

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Which tasks can be completed from Agency's request? (Assessing time and costs)

1. _____

2. _____

3. _____

List of supplies for Teams to purchase or bring (Please be very specific to include paint colors, # of gallons, etc.):

1. _____

2. _____

3. _____

Any supplies being provided by Agency? Yes No (Do not include these items in supplies above)
If so, please specify:

Estimated cost of supplies:

Special Tools/Equipment Needed: (Including Truck/Trailer To Haul Away Items)

If needed, is there access to water and electricity? Yes No
If so, indicate location:

List any safety concerns for volunteers:

Can they be corrected? If so, how?

Is there adequate on-site parking? Yes No
If no, is there an alternate parking area? Yes No Location:

Any additional comments or concerns?

For Project Two:

Number of Volunteers :

Time Required:

Project # 3 Description:

Project # 3 Address:

Building or Trade Permits Required?

Yes No

If so, can one be obtained prior to starting project?

Yes No

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Which tasks can be completed from Agency's request? (Assessing time and costs)

1. _____
2. _____
3. _____

List of supplies for Teams to purchase or bring (Please be very specific to include paint colors, # of gallons, etc.):

1. _____
2. _____
3. _____

Any supplies being provided by Agency? Yes No (Do not include these items in supplies above)
If so, please specify:

Estimated cost of supplies:

Special Tools/Equipment Needed: (Including Truck/Trailer To Haul Away Items)

If needed, is there access to water and electricity? Yes No

If so, indicate location:

List any safety concerns for volunteers:			
Can they be corrected? If so, how?			
Is there adequate on-site parking?	Yes	No	
If no, is there an alternate parking area?	Yes	No	Location:
Any additional comments or concerns?			
For Project three:			
Number of Volunteers :		Time Required:	
Form Completed By:		Date:	
Signature of Agency Representative Form Reviewed With:			
Date:			