

The Neighborhood LINK

Get Connected. Stay Connected. 

Listing Application

Eligibility

The group must have met two or more times within the last six-month period. Copies of the meeting agendas, minutes, and sign in sheets shall be submitted with the application. The meeting minutes need to include the number of individuals in attendance.

Step one: Decide what kind of group you are (**choose 1 only**)

- NEIGHBORHOOD ASSOCIATION
- BLOCK WATCH
- BUSINESS ALLIANCE
- HOA (formally registered with the state of AZ)

Step two: Organization Boundaries

__ Organization's boundaries must be within the City of Phoenix limits.

__ Must not be larger than one square mile.

__ Contact respective Neighborhood Specialist prior to submission of application.

[Click here to find Neighborhood Specialist in your area.](#)

Neighborhood Specialist Name _____

If more than one group exists in the boundary, the new requesting group shall meet with the existing group and city staff to ensure there is communication between the groups.

Step three: Members Listing

__ Primary and alternate contacts cannot reside in same household and must reside or conduct business within the boundaries of the group.

__ A minimum of ten households or businesses who live or conduct business within the area is required.

__ An organization will not be listed until all documents are complete, submitted and eligibility is verified.



City of Phoenix

When completed, return this form to:

City of Phoenix Neighborhood Services Department
Attn: Neighborhood Link
200 W. Washington St., 4th Fl Phoenix, AZ85003
E-mail: link@phoenix.gov Phone: 602-534-4444

CLASSIFICATION (choose 1 only):

NEIGHBORHOOD ASSOCIATION BLOCK WATCH BUSINESS ALLIANCE HOA

ORGANIZATION NAME: _____

Mission Statement: _____

Organization Boundaries: Identify by streets, including which side of the street contained within boundaries (i.e. South side of McDowell Rd.). Please attach map if your boundaries are not

North _____ South _____

East _____ West _____

Does your group use:

Nextdoor Facebook Instagram Webpage Other

Would you like to share your social media page under your group name?

When and where does your group meet:

When: _____ Where: _____

Primary Contact:

First Name _____ Last Name _____

Address _____ (required)

Email _____ Phone _____ Alternate# _____

Alternative Contact:

First Name _____ Last Name _____

Address _____ (required)

Email _____ Phone _____ Alternate# _____

HOA- Must be resident owner, property managers/ representative cannot list as primary.

This Neighborhood Link Form may be considered a public record pursuant to state statutes and it is possible that those persons listed will be contacted or solicited by commercial or nonprofit entities or by other organizations or persons. This information may be shared with City departments necessary. The City of Phoenix, by publishing this Neighborhood Link Form, does not endorse or support any organization, person, product or solicitation.

Approved By Officer Name & Badge ID# _____ Approved By Neighborhood Specialist Name _____

