



Public Health
Prevent. Promote. Protect.

Canton City Public Health
Environmental Health

2021 BEAUTIFY A NEIGHBORHOOD (BAN) APPLICATION

Organization or Individual's name: _____ Date: _____

If an Organization, name of contact: _____ Phone: _____

Address: _____ Email: _____

Date Preferred: _____ Back-Up Date: _____

(See dates listed below. Approved on first come basis.)

Reason for request: _____

Will neighborhood residents assist? (Y/N) _____ Projected number: _____

Area to be covered: _____

****Please Note**** The BAN program is designed to be a PARTNERSHIP between the City and its neighborhood organizations. By definition, this requires a degree of participation by the individuals living in the neighborhoods and the organization requesting a BAN date. Any scheduled BAN event WITHOUT participants from the neighborhood attending and participating in the clean-up will result in the event being cancelled.

Dates:	April 10 th -12 th	April 24 th - 26 th	May 8 th - 10 th
May 22 nd - 24 th	June 12 th - 14 th	June 26 th - 28 th	July 10 th - 12 th
August 14 th -16 th	August 28 th - 30 th	September 11 th - 13 st	September 25 th -27 th
October 2 nd – 4 th	*Strikethrough means the date has already been reserved.		

If you have questions, contact Gus Dria at 330-438-4647. Completed applications can be mailed, faxed or emailed (gdria@cantonhealth.org).

After review of the application, the organization/individuals will be notified if approved or denied.

Office use only: Date Received: _____ Time noted: _____

Meet objective (y/n) _____ Approved(y/n) _____ Reviewed by: _____ Date Notified: _____

Reason for disapproval: _____



420 Market Ave., N o Canton, OH 44702
Phone 330-489-3231 o Fax 330-489-3335 o www.CantonHealth.org

*This agency is an equal provider of services and an equal opportunity employer.
Promoting and protecting health since 1849.*