

Public Works Department

MEMORIAL TREE AND BENCH PROGRAM APPLICATION FORM

Applicant:	Date:
Name	Phone
Email	
Address	
Type of Memorial:	
Memorial Tree (15-gallon) and Plaque	
Type of Tree Requested	
Memorial Bench (6 ft. bench) and Plaque	
Please choose one of the following plaque description	ns:
O Dedicated to	O In Honor of
O In Memory of	O In Honor and Memory of
O In Loving Memory of	O In Tribute to
O Dedicated to the Memory of	O In Appreciation of
O Given in Loving Memory of	O In Grateful Appreciation of/to
O In Celebration of	

In addition, please provide any additional inscription (maximum of 10 lines of text and 40 characters (including spaces) per line allowed on the tree plaque and a maximum of 3 lines of text and 20 characters (including spaces) per line allowed on the bench plaque):		
Fees:		
Memorial Tree and Plaque (15-gallon tree) - Memorial Bench and Plaque (6 ft. bench) - S	· \$950 \$1,960 or \$3,720 <i>depending on width of sidewalk</i>	
Park Location:		
1 st Choice:		
and Obaica.		
2 nd Choice:		
I have read, fully understand and agree to abide	e by the Memorial Tree and Bench Policy	
My signature below indicates that I have read this document	in its entirety, and understand that:	
·	cisions, including but not limited to availability, bench style,	
bench location, tree type, tree location, and appli B. All language used on the plaques is subject to application.	pproval.	
Memorial Tree and Bench Policy	Fountain Valley and will be maintained according to the	
 D. The Memorial Tree and Bench Policy can be sto notice. 	pped, or temporary put on hold at any given time without any	
Signature	Date:	
eignature		
Please allow up to 4-6 weeks	for review process completion.	
Office Use Only:		
Reviewed By:	Date:	
Approved: Yes No		
Approved Location:		
Fees:		