

COMMEMORATIVE TREE and BENCH ORDER FORM

Return this completed form with payment.

You may not provide your own tree, bench, or plaque.

5490 Fifth Street - Cottleville, Missouri 63304

Ph: 636-498-6565



amy.lewis@cityofcottleville.com

CONTACT INFORMATION

- Name: _____
- Address: _____
- City: _____ • State: _____ • Zip: _____
- Phone: _____ • Email: _____

COMMEMORATIVE TREES and BENCHES

Also includes plaque & installation.

Trees are approx. 1.5 inch caliper/5-8 ft tall.

- Shade Tree X _____ (@ \$500 per tree)
- Flowering Tree X _____ (@ 500 per tree)
- Bench (Approx. 5-6 foot) X _____ (@ \$1500 per bench)

• TOTAL GIFT \$

DESIRED CITY PARK or CITY PROPERTY:

- Legacy Park Scott A. Lewis Park Hansen Park Other: _____

SPECIAL REQUESTS: please note special requests may not be met, however an effort to meet such requests may be made.

COMMEMORATIVE PLAQUE

Commemorative plaque is limited to 14 spaces and 6 lines of information. Remember that the space between words is also counted – the grid below should be used for the plaque inscription. Please check spelling, placement and wording as the plaque will be inscribed exactly as it is in the below grid. Inscriptions are subject to review for content and appropriateness.

HOW THE PROGRAM WORKS

- 1 Complete the *Commemorative Tree/Bench Order Form* and return to City of Cottleville with full payment. Payment must accompany the order form.
- 2 Trees and benches are normally ordered and installed in 1-6 months after the order form and payment is received. Trees are not typically planted between May 15th and October 1st or December 15th and March 1st. The commemorative plaque is placed with the tree or on the bench typically at time of planting/installation.
- 3 If an email is provided a notification will be sent when the tree is planted, or the bench installed. The City of Cottleville is under no obligation to replace the tree, bench, or plaque after installation.

I have read and agree to the terms above.

X _____
 Signature Print Name Date

Cottleville Office Use							
Date Application Received					Check No:		
Fee Receipt No:					Date Tree/Bench Ordered:		
Total Amount Paid: \$					Notes:		
City Administrator Approved:					City Clerk Approved:		