



PUBLIC WORKS DIVISION
Tree Planting Donor Permit

I, _____ hereby authorize the Corporation of the Town of Cobourg, Public Works Division (Parks Department) to procure on my behalf, a tree as a donation to the Tree Planting Program.

NAME: _____ TELEPHONE: _____

ADDRESS: _____

DESIRED DATE OF PLANTING: SPRING PLANTING (permit must be received by Town by February 1) for planting in April.

FALL PLANTING (permit must be received by Town by August 1) for planting in October.

PREFERRED LOCATION OF PLANTING: _____

SPECIES: _____

REASON FOR DONATION:

Birth of a Child Bereavement Other _____
(Please specify)

COMMEMORATIVE PLAQUE: YES NO

COMMEMORATION IN NAME OF: _____
(Please Print)

INSCRIPTION FOR PLAQUE: (Please print)

The undersigned accepts the terms of this permit including the policies and conditions appearing on this form and in the Tree Donation Program booklet.

Dated at Cobourg, this _____ day of _____, 200__.

Signed Applicant: _____

Signature of Applicant: _____

Contact Information:

Rory Quigley
Arborist
Engineering Department
Ph: 905-372-4555
Fax: 905-372-1555
rquigley@cobourg.ca

FOR OFFICE USE ONLY:

Species of Tree Selected: _____ Size: _____

Planting Date: DAY: _____ MONTH: _____ YEAR: _____

Installation Cost: \$ _____ Paid by Applicant: Cheque Cash