



## Memorial Tree Request Form

Name of Applicant: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work /Cell Phone: \_\_\_\_\_

Email Address \_\_\_\_\_

Desired Planting Location: Heard Park \_\_\_\_\_ Gibson Park \_\_\_\_\_ Halli Reed Park \_\_\_\_\_

Species of Tree Desired\* \_\_\_\_\_

\*Members of the North East Shade Tree Commission can assist in the tree selection based on your preferences and the tree location

Memorial Plaque inscription: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please make a check in the amount of \$500.00 payable to North East Shade Tree Commission for this request. The \$500.00 will cover the cost of the tree, plus planting, and the cost of the memorial plaque**

Return To:

**North East Shade Tree Commission  
Borough of North East  
31 West Main Street  
North East, PA 16428**

**Phone: 814-725-8611  
Fax: 814-725-4996**

Requestors Signature \_\_\_\_\_

Date \_\_\_\_\_



## North East Shade Tree Commission Use Only

◆.....◆  
Date Received: \_\_\_\_\_

Date of Site Check: \_\_\_\_\_

Approved

Denied

\_\_\_\_\_

\_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_