

Application for Community Gardening Assistance

Name: _____

Address: _____

Phone#: _____

E-mail: _____

Your Role in the garden _____

Status of the Garden:

____ Just beginning to plan

____ Ready to build

____ Established

Type of Garden: ____ Individual Plots __ Cooperative ____ School/Youth ____ Combined

Size of Garden: ____ < ¼ acre; ____ ¼– 1 acre; ____ 1-2 acres; ____ > 2 acres

Please list the name of any organizations this project is connected with _____

How many people do you expect to be involved? _____

What is the address of the community garden? _____

Who owns the land? _____

Do you have written permission to use the land for 6 or more years?

Do you have water available on the site? If no, how do you plan to get water?

Do you know what the land was used for in the past?

Have you done a soil test? _____

Did the soil test indicate any significant remediation? _____

How do you plan on funding the community garden?
