



Memorial Bench and Plaque Request Form

Application date:

Applicant Information

Name:

Address:

City/Province:

Postal Code:

Telephone:

Memorial Bench Information

Person/Group being memorialized:

Requested quantity:

Requested item: 6 Foot Sterling Bench with Plaque

Yes \$4,400 plus HST

Plaque Only

Yes \$ 750 plus HST

Requested location:

Applicant to be notified when placement is completed:

Yes

No

Wording/Phrasing for plaque

Total Due: \$

Please return completed forms to parkadmin@norfolkcounty.ca

FOR OFFICE USE ONLY

Scheduled to be placed

Applicant notified

Confirmation of location

Locates complete, if applicable

Date:

Authorized signature: