

City of Livingston Memorial Bench Application

Date: _____

Please complete the application fully. After we receive the application and payment, we will order the plaque and bench. The bench will be installed on a 4-ft x 6-ft concrete pad in your selected location.

1. Contact Information:

Your Name: _____

Address: _____

Phone Number: _____

Email Address: _____

2. Name of Requested Site (Park or Trail):

3. Please check any of the following that you would like to occur:

Notification after installation

Be provided with a photograph of the bench

Receive a donation receipt and certificate

4. Engraving will be limited to: "In Memory of" or "In Honor of" and the name of whom the bench it to memorialize. Please indicate how you would like the plaque to read:

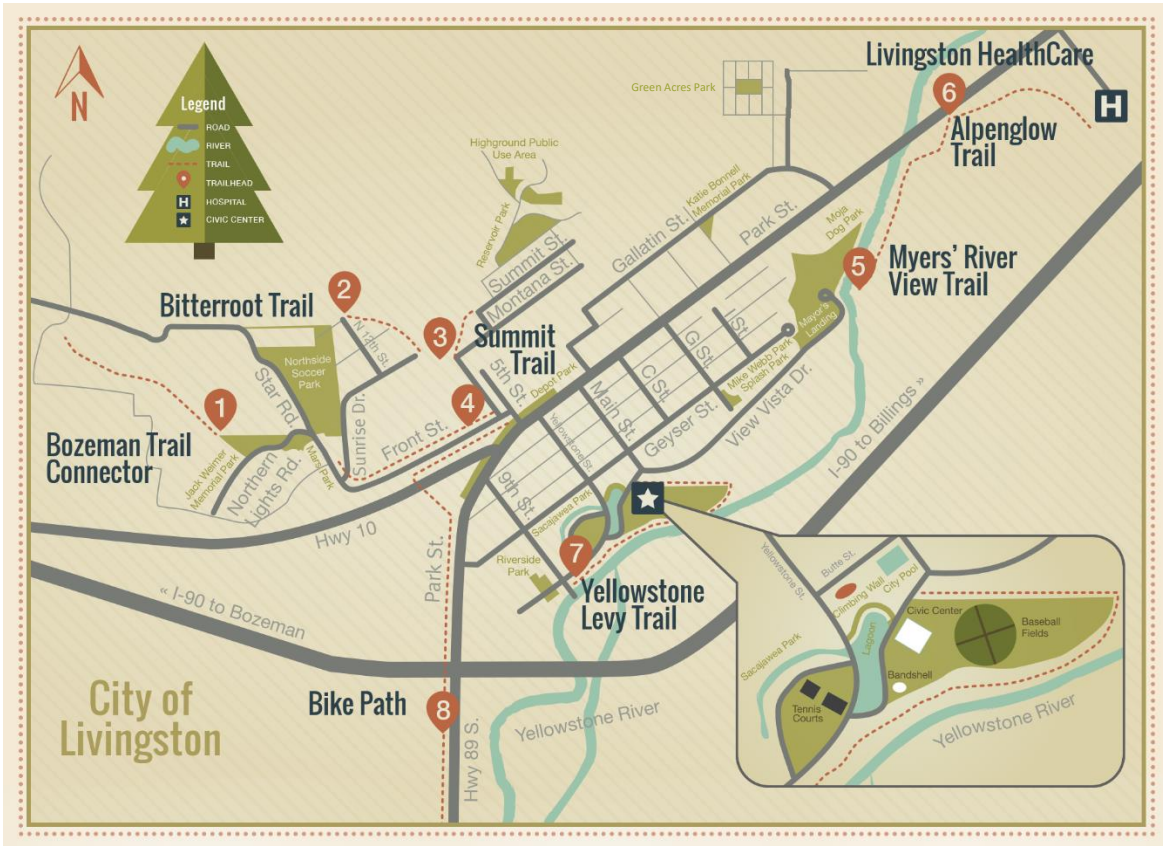
5. Please send or bring this completed application and payment of \$1200.00 to:

City of Livingston Parks Department (406-222-5667)

Attn: Faith Kinnick

Email: fkinnick@livingstonmontana.org

330 Bennett St.
Livingston, MT 59047



https://www.livingstonmontana.org/sites/default/files/fileattachments/parks_and_trails_committee/page/2771/livingston_park_county_trails_plan_2007-2008.pdf

*****INTERNAL ROUTING *****

Submitted by: _____

Photo provided by: _____

Notification completed by: _____

Donation receipt mailed date: _____

Finance clerk, please attach payment receipt to application