City of Terrell

Commemorative Tree Planting Program Application

(Please print or type)

DATE: _____

LOCATION: _____

DONOR INFORMATION:

NAME: _____

ADDRESS: _____

CITY,ST, ZIP: _____

PHONE NO.: _____(DAYTIME) _____ (EVENING)

DONOR SIGNATURE: _____

TREE INFORMATION:

TYPE: _____

SIZE: _____

COST: _____

COMMEMORATIVE PLAQUE: YES ☐ NO ☐

[If yes, the plaque will contain three (3) lines with twelve (12) characters, numbers
and/or spaces per line for a total of thirty-six (36)]

Example
IN MEMORY OF (12 characters)
JOHN A. DOE (11 characters)
JAN. 31,1999 (12 characters)

Return this form & payment to:
City of Terrell Public Works Dept.~ 201 E. Nash St. / P.O. Box 310~ Terrell, Texas 75160
Phone: (972) 551-6609 / Fax: (972) 551-6620