

Application Details	SECTION 1
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Name _____	Email _____
Address _____	City _____
Postal Code _____	Telephone _____

Declaration	SECTION 2
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Are you (the applicant) the owner of the property where the tree will be planted?

Yes No If no, please include a letter of support from property owner.

I acknowledge that the information contained in this application is true to the best of my knowledge. I further understand and accept that the City of St. John's is not bound to accept any application. Only those selected by random draw will be notified by mail.

Applicant _____ Date _____

Privacy Notice	SECTION 3
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Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process your application. Questions about the collection and use of the information may be directed to the Operations Supervisor of Parks and Open Spaces, pwadmin@stjohns.ca.

Please send completed application to:	Access 311 First Floor, City Hall P.O. Box 908, 10 New Gower Street St. John's, NL A1C 5M2 or Email: pwadmin@stjohns.ca	For further information: Phone: 311 Email: pwadmin@stjohns.ca
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