

Plaques and Memorials Application

APPLICANT INFOR	MATION		
Name of Applicant			
Address of Applicar	nt		
Home Phone	Work Phone	Email Add	dress
DONATION INFOR	MATION		
Plaque/Memorial Ty	rpe:		
Location Preference) :		
Provide name and	description of the intended s	subject of Plaque/M	emorial:
Wording on Plaque,	/Memorial:		
Funding Source(s):			
applicant per the Pl estimate will be pro	aques and Memorials Policy vided by the County upon a	. The County shall in pproval of this appli	a plaque and/or memorial shall be by the astall all plaques/memorials projects. A cost ication. The cost estimate must be a start. See Plaques and Memorials Policy for
I HAVE READ AND	AGREED TO THE TERMS	OF THE PLAQUES	AND MEMORIALS POLICY
Requested By	ACKEED TO THE TERMS	OI IIIE I LAQUES	Date
For plaques and men 11476 C Ave, Auburn		ing, submit this appl	ication to Facilities Management:
	norials in a public recreation Center Dr Suite 220, Auburn,	•	pplication to Parks and Open
	norials in and around transpo Drive Suite 220 Auburn, CA 9		omit application to Public Works:
	(TO BE COMPLETED BY	PLACER COUNT	Y STAFF)
Reviewed By Department Head			Date
Reviewed By CEO Representative)		Date