

Memorial Tree: Placement Request

Section	1: Applicant Details	Please PRINT clearly				
Name:						
Address:						
Town:		Post Code:				
Tel No:	e-mail:					
Section 2: Tree Details						
Please tick the box below to select the tree type.						
Malus (crab apple)						
Acer						
Cherry						
Birch						
Rowan						
Beech						
Other har	dwood					
Section	3: Location details	Please PRINT clearly				
Please describe where you wish the tree to be sited (be as precise as possible) If it is not possible to site the tree at your chosen location, an Officer will contact you to discuss an alternative.						
Preference						
Preference :						
Preference :	3:					

The Council reserves the right to decline the wording of a dedication.

Please **PRINT** clearly

If there is a concern over the chosen wording, an Officer will contact you to discuss this.

Section 4: Details of Dedication

(Please use a maximum of 35 words)					
Please do not decorate, leave ornaments, or add edging or stones at the site of the memorial trees. The Council reserves the right to remove such items.					
Signature of Applicant:					
Date:					
Please email the completed form to: -					
environmental.services@inverclyde.gov.uk					
or post to: -					
Inverclyde Council Unit 1 Ingleston Park Cartsburn Street Greenock Inverclyde PA15 4UE					
Please allow 4 to 6 weeks for the tree to be supplied and planted.					

Section 5: FOR OFFICE USE ONLY						
Date Received:			Applicant Contacted:			
Confirmed Location (if different from above):						
Proof Sent to Customer:			Proof Returned by Customer:			
Installed:		Receipt No:		Pass to Technical Team for inclusion on database		
On Dbase:		Intls:		Pass to Admin section for filing		