



TOWN OF ACTON
472 Main Street
Acton, Massachusetts, 01720
Telephone (978) 929-6431
Fax (978) 929-6340

Natural Resources Department
Tom Tidman, Director

Application Date: _____

Name of Applicant: _____

Mailing Address: _____

Telephone: _____
Home Cell

Email: _____

Name of Honoree: _____

Honoree's Connections to Acton's Conservation Lands: _____

Conservation Land Choice: _____

Bench Site or Approximate Location : _____

Preferred type of bench: _____ wood _____ granite _____ recycled plastic

What would you like the plaque/engraving to say: _____

Below for Town Use Only

Fees

Bench: _____

Vendor: _____

Shipping: _____

Installation,
Administration,
And/or Maintenance Fee
(Per Conservation
Commission Minutes

11/7/2012): _____ **\$ 500.00** _____

Total: _____

Donor approval of location, language and final
payment amount:

X _____

Amount and check # _____

Bench ordered date: _____

Bench installed date: _____

Donor notified of installation
date: _____

The Town of Acton does not accept
responsibility for any unauthorized benches, or
for the purchase, placement, maintenance, etc.
of benches other than in compliance with its
internal policies or procedures.

Application received date: _____

NR Director reviewed date: _____

Comments: _____

LSCOM reviewed date: _____

Comments: _____

Exact Plaque Language:

Final site
location: _____

BOS approved date: