



City of Mount Clemens Memorial Tree Application Form

If you would like to donate *\$320.00 to sponsor a Memorial Tree in the City of Mount Clemens, please complete this form along with a check made payable to "City of Mount Clemens" and return to the Street Department, 95 Eldredge, Mount Clemens, Michigan 48043. If you have any questions, please contact the Street Department at 586-469-6847, ext. #514.

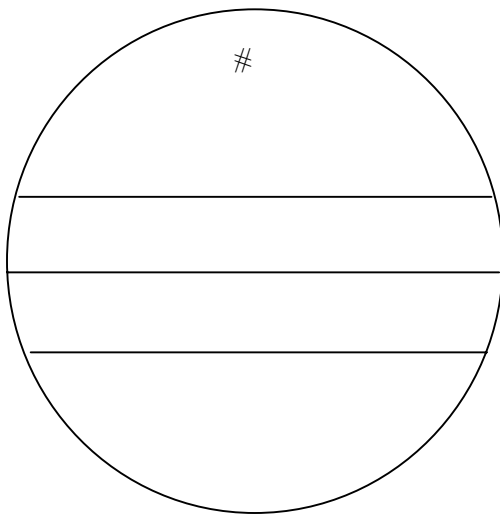
Your Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Alternate #: _____

Please print the exact wording you would like
on your 4" engraved brass disc
Maximum of 3 lines - 40 characters
(spaces do not count as a character)



Type of tree requested (please one):

- Crimson Sentry Maple
- Red Michigan Maple
- Autumn Blaze Maple
- Autumn Gold Ginkgo
- Red Oak
- Prairie Fire Crabtree
- Sugar Tyme Crabtree
- Velvet Pillar Crabtree
- Cleveland Select Pear
- Redspire Callery Pear
- Other: _____

NOTE: As part of the city ordinances, a special section referencing trees, shrubs, and plants in the public way has been developed (35.100-35.115). All trees planted in the public way must be within the guidelines of this ordinance.

Please describe the location where you would like the tree permanently planted. If you would like to submit a diagram, please attach it to this form.

** This cost is an estimate and subject to change based on type, size, and availability. Total payment is due before the tree is ordered and planted.*