

# CITY OF WHEATLAND

111 C Street  
Wheatland, CA 95692  
Office: (530) 633-2761  
Fax: (530) 633-9102

## Community Gardens Application

Date

### Applicant Information

Name (Last)

Name (First)

M.I.

Address

City

State

Zip

Phone

E-mail

Wheatland Resident  Yes  No

### Garden Information

Lease Term (Start/End  
Dates)

New  
Gardener

Returning  
Gardener

Number of Plots

Please provide a  
brief description of  
the types of plants,  
herbs, or shrubs you  
wish to plant in the  
plot(s), if leased.

By signing below, I, \_\_\_\_\_, acknowledge that the information I have provided in this application is true and correct to the best of my knowledge. I understand that this application does not guarantee me the right to lease a plot and that all plots are assigned by priority and then on a first come, first serve basis. I further understand that approval of this application is subject to review of City staff and agreement to abide by the Community Gardens Governing Rules as contained in the Community Gardens Handbook.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Deposits & Fees

Annual Fee: \$50.00

Deposit: \$50.00

### For Official Use Only

Application Received \_\_\_/\_\_\_/\_\_\_

Application Approved \_\_\_/\_\_\_/\_\_\_

Received By: \_\_\_\_\_ Approved By: \_\_\_\_\_

Fees and Deposit Paid: \$ \_\_\_\_\_