CITY OF WHEATLAND

Community Gardens Program
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: $ 25.00
Deposit: $50.00

For Official Use Only

Application Received ____/____/____ Application Approved ____/____/____

Received By:_____ Approved By:_____ Fees and Deposit Paid: $_____