

City of Watertown
Park and Recreation Department
Memorial Donation Application

Date of Application: 3/20/23 Type of Memorial: TREE ☒ BENCH ☐ OTHER ☐

Donor's Name: ~~Matt Hancock~~ Watertown Softball

Donor's Address: 1421 Timber Ridge Trl City: Watertown

State: WI Zip: 53098 Phone #: 262-370-2250

Name of person/group honored by memorial: Paul Hinrichs

Location: PARK: BQ Location: _____

Street Address: _____

Tree/Bench (circle one): 2 NEW or REPLACEMENT

Plaque Wordage: _____

Donor Signature: Matt Hancock Date: 3/20/23

OFFICE USE ONLY

Date of Commission meeting: 4/17/23 (circle one) APPROVED DENIED

Reason for denial: _____

If this is a replacement bench, original donor name, address, phone number:

Date notified: _____

Is the original donor interested in replacing or restoring the bench? YES ☐ NO ☐

If they are not repairing the bench, do they want the plaque returned? YES ☐ NO ☐

Where should the plaque be mailed? _____

If no, date of disposal of the deteriorated bench: _____

Total Payment Due: \$390.00 (circle one) CASH CHECK # _____

Date the bench was ordered: _____ Date plaque was ordered: _____