

The Town of Easton Public Space Committee

ADOPT A LANDSCAPE PROGRAM

Application to Adopt a Public Space

Name of Sponsor: _____

Contact Person: _____ Email _____

Address: _____

Tel: _____ Fax #: _____

Public space location _____

How would you like the sign to read? _____

Notes: _____

Note of Understanding

It is understood that I would like to participate in Easton's Public Space Adoption Program and wish to plant and maintain the designated area.

I agree to the following conditions:

1. Plantings shall be completed by Memorial Day, and run through the first frost in October. Sponsors will be responsible for keeping areas free of weeds.
2. Design of the area may include natural materials (shrubs, plants and flowers).
3. If planted items perish during the course of the summer, they must be replaced as needed.
4. Sponsors shall be responsible for the removal of debris at the end of the season.
5. The Town of Easton shall provide appropriate signage to be placed on Adopted Public Spaces. All signs are the property of the Town of Easton and will be retrieved by the City at the end of the season.
6. Plant height to be kept under 30".

Signature of Sponsor: _____ Dated: _____

Please Print this page and return completed application to:
Town of Easton Public Space Committee
136 Elm Street
North Easton, MA 02356