



GARDEN PLOT REQUEST FORM

BONNEY LAKE COMMUNITY GARDEN

Location: 18424 89th Street East, Bonney Lake

Instructions: Provide all requested information. Sign and date the form. Return this form and payment to:

Mail: City of Bonney Lake, Attn: Community Garden, P.O. Box 7380, Bonney Lake, WA 98391

In person: 9002 Main St E, Suite 200, Bonney Lake, WA 98391. By fax to (253) 862-8538.

Name(s): _____ City of Bonney Lake Resident? Yes No

Address: _____

Home Phone: _____

Cell/Work Phone: _____

E-mail Address: _____

Garden Plot Request:	Plot Number (if known)	Annual Fee <i>Regular Rate</i>	<i>Discounted Rate*</i>
<input type="checkbox"/> Single Plot (6'x12')	_____	___ \$25.00	___ \$12.50
<input type="checkbox"/> Double Plot (Two 6'x12' plots) <i>as available</i>	_____	___ \$50.00	___ \$25.00

* Per BLMC 3.90.050 a 50% discount is available for senior/disabled persons who qualify for a water rate discount per BLMC 13.04.100(A) and for adults with a current valid Washington State Electronic Benefits (EBT) card.

The City may share applicant information with Harvest Pierce County (part of the [Pierce Conservation District](#)) for organizing and development. Yes - please share my contact info. with Harvest Pierce County.

Opt-Out – please do not share my info. with Harvest Pierce County.

Acknowledgements:

The undersigned hereby applies to the City of Bonney Lake for use of the above community garden plot and certifies the information is correct and furthermore agrees to abide by all ordinances, policies, and rules and regulations which may apply.

The applicant hereby agrees to indemnify and hold harmless the City of Bonney Lake and its officers, agents, officials, employees, and volunteers, from and against any and all claims, demands, suits, action, payments and judgments as a result of injury or death of any person or property damage to any property sustained by applicant or any other persons which arise from or in any manner grow out of any act or omission on or about said facility by applicant, its agent, guest, or employees, in the execution of this Garden Plot Request Form including any and all expenses, legal or otherwise incurred by the City or its representatives in the defense of any suit or claim.

The applicant agrees to follow guidelines established by the City of Bonney Lake.

Forms submitted to the City may be subject to public disclosure under the Washington State Public Records Act (RCW 42.56).

Signature: _____ Date: _____

Printed Name: _____ Fee Enclosed/Paid: \$_____

OFFICE USE ONLY			
Date Received: _____	By: _____	Approved By: _____	Date _____
Amount Paid: _____	Plot # _____		