



NEW COMMUNITY GARDEN APPLICATION
(for Development of a New Partnership Site or Improvement of an Existing Site)

Neighborhood Association or official or unofficial name (If applicable):

Contact Person(s) - 2 Leaders Required

1. Name: _____

Address: _____
Street City Zip

Phone: _____

Email: _____

2. Name: _____

Address: _____
Street City Zip

Phone: _____

Email: _____

Garden/Park Site

Name of garden (if existing): _____

Address: _____
Street City Zip

Map/Block/Parcel: _____

Total land area size: _____

Other non-gardening uses on the site and their size: _____

Property Owner Name: _____

Property Owner Address: _____
Street

City Zip

Property Owner Phone: _____

Property Owner Email: _____

Has the property owner been contacted and is willing to sign a use agreement? _____

Garden/Park Site Demographics

Size of total garden site: length _____ width _____ fence? _____ wall? _____

City Council District: _____

Representative: _____

Current number of gardeners or neighborhood participants who have been contacted who would benefit and use the site: _____

Attach a measured map/plan of the existing site including the source and/or potential location of Water.

What will be (or is) the source of water to supply the site? _____

Are the potential participants willing or able to cover the cost of water? _____

If not, what can they afford to pay? _____

Local Need and Support

1. Has an actual need for gardening plots in the neighborhood been determined? Yes No

If yes, please explain how: _____

2. How will neighborhood support for the community garden be (or has been) determined?

____ a survey of 2-3 block radius around the site

____ a petition

____ a neighborhood meeting

____ other

3. Will the community garden be sponsored by a local group or organization? Yes No

4. What is the targeted group that will be participating and/or targeted for participation?

shelter senior center

soup kitchen school

day-care center, program medical, care facility

youth program other

other (please describe) _____

5. What is the approximate number of committed participants from this targeted group? _____

6. Is there any other local support or potential for support regarding:

local volunteer labor groups

soil preparation

local sponsors and/or financial support

local materials donations including fencing, paths

art or sculpture

**Please return to SCG by email or mail to: anneliese.kerr@springfieldcommunitygardens.org ,
1126 N Broadway, Springfield, MO 65802.**