City of Jersey City Adopt-A-Lot Application

STEVEN M. FULOP, MAYOR

Mark Redfield, Director
Department of Public Works
13 Linden East
Jersey City, NJ 07305

Stacey Flanagan, Director
Dept. of Health & Human Services
199 Summit Avenue Unit F
Jersey City, NJ 07306

PLEASE TYPE OR PRINT ALL INFORMATION.

Submit completed ORIGINAL application and plan to the Department of Public Works with a copy to the Department of Health & Human Services at the above address. If applying for more than one lot and lots are not contiguous please fill out a separate application for each.

<u>ORIGINAL</u> applicant and witness signatures must appear on all four copies of the license agreement (City Clerk, law, DPW and Tenant).

THANK YOU!		
Date		
Address of vacant lot(s) and/or Name o	f Park:	
(If Known) Block: Lot:		
Name of Community Association:		
Contact Name:		_
Mailing Address:		_
Email Address:		_
Phone: ()		
Please list the name and titles of your a	ssociations officers:	
Name	Title	
Address	Phone Number	
Email Address		

Name	Title
Address	Phone Number
Email Address	
Name	Title
Address	Phone Number
Email Address	
 Name	 Title
Address	Phone Number
Email Address	
 Name	 Title
Address	Phone Number
Email Address	
Name	 Title
Address	Phone Number
Email Address	

Please provide a brief history of your association:		
1. What public purpose will the adopted site be used for:		
2. Describe the activities you will undertake in furtherance of the above purpose:		
3. Estimate the approximate value or cost, if any, of the activities you will undertake:		

4. If your association is a corporation p status.	ease attach documentation of nonprofit corporatio
CERTIFICATION.	
I certify that the information provided	s true.
Signature	 Date
Printed Name	