



CITY OF BETHLEHEM
Attention: Recreation Bureau
10 E CHURCH STREET
BETHLEHEM PA 18018
610-865-7081
EventApp@bethlehem-pa.gov

MEMORIAL BENCH REQUEST

(City Park or Recreation Areas Only)

ANSWER THE FOLLOWING QUESTIONS (PLEASE PRINT)

APPLICANT'S NAME	TELEPHONE NUMBER	EMAIL ADDRESS
APPLICANT'S ADDRESS		ZIP CODE
LOCATION REQUEST	DATE	PLAQUE- YES OR NO SIZE- 3"X5" OR 4"X6"

PLEASE READ THE FOLLOWING BEFORE SUBMITTING YOUR APPLICATION:

- APPLICANT WILL BE RESPONSIBLE TO PAY FOR THE BENCH AND PLAQUE. PLEASE CONTACT PAOLINI'S CAST IRON STONE 610-252-0971. 1800 DELEWARE DR EASTON PA 18042.
- DELIVERY WILL BE SCHEDULED WHEN THE BENCH AND PLAQUE IS COMPLETED, MUST PROVIDE 48 HOURS NOTICE (NO HOLIDAY OR WEEKEND DELIVERY).
- THE BENCH LOCATION WILL BE HONORED ON A FIRST COME, FIRST SERVE BASIS.
- IF THE BENCH OR PLAQUE BECOMES DAMAGED THEY WILL BE DISCARDED ACCORDINGLY.
- LOCATION AND PLACEMENT WILL BE REVIEWED ON A CASE BY CASE BASIS.

I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if knowingly make any false statement herein I am subject to such penalties that may be prescribed by law or ordinance.

APPLICANTS SIGNATURE _____ DATE _____

FOR OFFICE USE

APPROVAL
SIGNATURE:

DENIAL:
SIGNATURE:

DATE: _____

APPROVED LOCATION:

DELIVERY DATE: