## **Agreement**

## Plaque Program

Community Services
Parks & Forestry



Personal information on this form is collected under the authority of the Municipal Act, 2001, s. 11 and the City of Mississauga Policy No. 05-07-02.The information will be used to administer the Tree and Bench Donation Program and to correspond with the person responsible for the donation or purchase. Questions about this collection should be directed to the Supervisor, Cemetery Operations, Parks and Forestry, 950 Burnhamthorpe Road West, P.O. Box 1850, Mississauga, Ontario L4Y 3Y6, Telephone 905-615-3200 ext. 5566.

TO: CORPORATION OF THE CITY OF MISSISSAUGA	"City")		
I, (First and Last name of purchaser), wish to participate in the City's Plaque Program on the following terms:			
<ol> <li>Plaque Purchase         I direct the city to purchase on my behalf the following number of Plaques:         (Number of Plaques to be purchased)         2. Payment         In person: Payment (as per the City's applicable Fees and Charges Bylaw) can be made using Visa, Mastercard, American Express, Debit or a cheque at 950 Burnhamthorpe Road West, Mississauga, ON.     </li> <li>By mail: Mail your cheque to Parks &amp; Forestry Division, 950 Burnhamthorpe Road West, P.O. Box 1850, Station B, Mississauga, Ontario L4Y 3W6.</li> <li>Cheques should be made payable to the "City of Mississauga"</li> <li>Agreement To Conditions</li> <li>I acknowledge and agree to the following conditions:         <ul> <li>(a) this Plaque will accompany a Bench or Tree I have donated under a separate agreement;</li> <li>(b) each Plaque shall be oval in shape, made of cast bronze metal, with approximate dimensions of 6 inches (15 centimetres) by 4 inches (10 centimetres) and raised lettering, as illustrated in the attached sample sketch an initialled by me;</li> <li>(c) I will inform City staff of the name I wish to be engraved on each Plaque;</li> </ul> </li> </ol>	same City property. Prior to any relocation or rer the City will attempt to contact me at the most re address on file with the City. It is my responsibilinatify the City of any change to my address;  (j) if any part of my payment is not needed to purche engrave, install, maintain, replace or relocate Plapurchased under this Agreement, the balance shaused to provide and maintain trees and benches	ther nd cost; n anner as a Plaque nstance. the moval, cent ity to ase, ques	
Donator Full Name (Print)	Signature Date		
Address			
City, Province	Postal Code		

Home Phone Number

Date

Signature

Witness Full Name (Print)

Cell Phone Number