



APPLICATION FOR A MEMORIAL/DONATION LOCATED ON TOWN PROPERTY

Please review the [Town's Policy for Memorials and Donations Located on Town Property](#) prior to submitting this application. For questions, please contact Carrboro Public Works at 919-918-7428 or pworks@carrboronc.gov.

Applicant's Information

Name(s): _____

Primary Contact: _____

Mailing Address: _____

Telephone: _____ Email: _____

Memorial/Donation Information

Memorial/Donation in Honor of:

☐ An individual ☐ A place ☐ An event ☐ Other _____

Type of Memorial/Donation:

☐ Bicycle Fix-it Station ☐ Drinking Fountain ☐ Picnic Table

☐ Bicycle Rack ☐ Park Bench ☐ Tree

☐ Other (please describe): _____

Proposed Location (attach a sketch of the location if possible): _____

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Name and/or description of individual, place, or event to be memorialized: _____

Significance of the individual, place, or event; contribution to the community; and/or why the applicant believes the memorial/donation should be established:

Contact information for individual being memorialized (if applicable)

If the individual is living, does the applicant have the individual's permission to pursue placement of a memorial/donation? ☐ Yes ☐ No If yes, please provide Individual's contact information.

Name: _____

Address: _____

Telephone: _____ Email: _____

If the individual is deceased, does the applicant(s) have permission of the immediate family?
☐ Yes ☐ No If yes, please provide contact information of person(s) who granted permission.

Name(s): _____

Relationship to Deceased: _____

Address: _____

Telephone: _____ Email: _____

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Memorial/Donation Plaques

Memorial/donation plaques shall be made of bronze and the text shall be limited to 3 lines. Applicants may choose one of the below acknowledgements/memorial options and the two remaining lines may contain the name of person or donor and dates of donation or lifespan.

Please select one acknowledgements/memorial option below and complete the information as it will appear on the plaque.

☐ Donated by _____

☐ In memory of _____

☐ Dedicated to _____

Please complete the remaining two (2) lines as they will appear on the plaque:

Name of person or donor: _____

Date of donation or lifespan: _____

Maintenance

The long-term care and maintenance of donated elements is important to both the donor and the Town. Periodic maintenance, performed by Town employees, will be made on each donation to ensure that they remain in the highest quality.

Costs

The applicant is responsible for the cost of the purchase and installation of the memorial/donation. The Town will provide quality, durable and low-maintenance choices to the donor to keep maintenance expenses low. The Applicant will be invoiced for the full cost of the memorial/donation.

The Town has an interest in promoting Equity for all residents. If a resident would like to request a memorial but does not have the financial ability to pay for the item, they can file an application with the Public Works Department. The application will be reviewed in the same manner as all other applications. Those applications which would be approved after evaluation by Public Works, will be brought to the Recreation and Parks Commission.

Signature

Signature of Applicant (Primary Contact)

Date

Email completed application to pworks@carrboronc.gov or mail completed application to Carrboro Public Works, 301 W. Main St., Carrboro, NC 27510.